

**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: The Stratford Census: 75/77; (32/33 in memory care)
Visit Date and day of the week Tuesday, July 15, 2014	Time spent in facility 1 hour 15 minutes	Arrival time 5:10 PM
Name of person(s) with whom exit interview was held Executive Director		Interview was held in person: Exit interview completed by phone.
Committee members present: Three Committee Members		
Number of residents who received personal visits from committee members approximately 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 N/A (Required for NHs only – record date of most recent survey posted) :	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	2. Several residents stated that they felt they had to wait longer than reasonable for staff response in certain situations. 4. Many residents were in the dining room eating upon our arrival. Others were in the foyer together, and others still were in their rooms, in some cases interacting with their roommates. 5a. Only a few staff were wearing nametags.
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?	Yes	
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?	Yes/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. The facility's air conditioning seemed inadequate at time of visit. 9. An area of past persistent unpleasant odor (outside the laundry room) had no such odor during this visit.
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?	Yes	
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)	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	

*** 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>15b. Planned activities are confined to very specific, consistent timeframes during the week. Weekend activities, which include “movie and popcorn” and “taped church service” seemed inadequate to the committee.</p> <p>17b. Residents had mixed opinions on quality of meals and snacks; but most stated the meals were good and at least fair.</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)	N/A	
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	
17b. Did residents express positive opinions regarding their dining experience (the food provided)?	Yes/No	
17c. Is fresh ice water available and provided to residents?	Yes	
18. Do residents have privacy in making and receiving phone calls?	No	
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 N/A	

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>Present Areas of Concern:</p> <ol style="list-style-type: none"> 1. Staff responsiveness 2. Robustness of activity offerings 3. General condition of facility <p>Past Areas of Concern:</p> <ol style="list-style-type: none"> 1. Bed bug infestation 2. Staff workload and turnover 3. Lack of nametags 4. Delayed improvements in the memory care area: color enhancement in painting and floor covering <p>There were no reports of bedbug issues and the treatment truck was no longer on premises. One staff person indicated that the problem was under control.</p> <p>Nametag use remains sporadic at best.</p> <p>No apparent progress made in Alzheimer’s Unit renovations.</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>Given the committee’s decision to visit after 5:00PM, the Administrator was not present at the time of our exit. Upon our arrival we had a brief conversation with the staff in charge. The committee noted several instances of very positive, caring resident-staff interaction. A persistent odor issue appears to have been corrected. Other past-expressed concerns about theft and privacy issues were not mentioned by any of the numerous residents with whom we spoke. At the moment, pest issues are seemingly under control. The activity calendar in the Alzheimer’s unit showed condition-specific events, as well as different tips about strategies to assist individuals with memory impairments.</p> <p>Although we visited during mealtime, some of the activities posted in the main unit’s calendar left a lot to be desired. The weekend offerings were particularly meager. Lastly, long-ago promised Alzheimer’s unit repairs are still not underway, which leads to a very</p>

drab appearance. Unfortunately, the main section of the building, which still has a generally nice appearance and ambiance, is starting to show signs of noticeable wear and tear. This condition, if not addressed, will tend to diminish the homelike quality of the facility for which it has been praised in the past.

A committee member reported to the executive director by telephone, as she was not available at the time of the visit, and she was receptive to this feedback.