

**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: 80/120
Visit Date and day of the week Tuesday, July 15th, 2014	Time spent in facility 1 hours 0 minutes	Arrival time 6:45pm
Name of person(s) with whom exit interview: Resident Care Coordinator		Interview was held by phone.
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. Residents generally appeared neat and clean. No strong personal body odors were detected by the committee. Some resident rooms were noticeably dirty, with laundry laying in piles. 4. Committee members witnessed significant resident-to-resident interaction. There was also some resident-staff interaction, as one resident's hair was being braided by staff and CNA's were seen moving residents about the building. 5a. Staff name tags usage still not widespread.
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. Residents complained of delayed mail and social security payments.
9. Did you notice unpleasant odors?	No	
10. Did you see items that could cause harm or be hazardous?	No	9. No unpleasant odors were detected or mentioned by the residents..
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	10b. The uni-sex facility near the cafeteria seems to have been turned into an "Employee Bathroom" .
11. Did residents feel their living areas were kept at a reasonable noise level?	Yes	
12. Does the facility accommodate smokers?	Yes	12. The facility will no longer tolerate smoking as of 07/24/14. See issues of concern.
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

Facility / date: Crescent Green 07/15/14

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	15a/b. The activity calendar posted reflected the events for that day alone. That said, it was very detailed and there seemed to be a number of good activities. As previously noted, no activities were scheduled in the evening time. 18. Residents do not have a private place to make phone calls. The committee witnessed one resident sneak into the activities room to use the phone inside for a personal call. This issue was mentioned by numerous residents as a matter of concern. 20. The facility's resident council is active.
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.)	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	
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
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. Give summary of visit with Administrator or SIC. Does the facility have needs that the committee or community could help address?
<p>Past areas of concern (call bells, private call space, and tension between residents) were still in evidence. The private call space concern was voiced by numerous residents. Residents complained that they had given up all privacy when moving to the facility. The committee also heard a heated argument between residents and other residents reported that there had been between 2-3 physical "fights" between residents in the last month. New issues:</p> <p>The management of Crescent Green has determined that they will no longer allow smoking on the premises. The committee is concerned that it will lead to an increase in tension.</p> <p>Additionally, it was reported that there are "shady" goings-on at night (between 1-3am) wherein doors are unlocked and cars coming in and out of the parking lot with strange individuals entering and exiting the facility. Further discussion of this was limited as residents feared retaliation.</p>	<p>Committee member spoke with the resident care coordinator by phone on the morning of 07-17-2014. He conveyed the committee's concerns regarding the heightened level of tension and reports of fighting. Further discussion of the cigarette smoking ban was initiated and the RCC informed the committee that smoking cessation efforts had been underway for over one year. The committee conveyed its sympathy for the problem posed by smokers who do not follow the rules and simply asked that the facility do everything possible to ease the transition, especially regarding long term (30+ year) smokers. RCC was aware of the night time irregularities and confirmed that an investigation by management was ongoing.</p>