

## Community Advisory Committee Quarterly/Annual Visitation Report

County: Chatham	Facility Type: <input type="checkbox"/> Family Care Home <input type="checkbox"/> Nursing Home <input checked="" type="checkbox"/> <b>Adult Care Home</b> <input type="checkbox"/> Combination Home <b>6 beds</b>	Facility Name/Address: Livewell on 11472 Club Drive 11472 Club Drive Chapel Hill NC 27517   Governor's Club
Visit Date: 4/13/23	Time spent in facility: 17 min	Arrival time 5:00 pm
Name of person exit interview was held with: Interview was held: Tishura Dell   X in Person <input type="checkbox"/> Phone  <input type="checkbox"/> Admin. <input type="checkbox"/> SIC (Supervisor in Charge)   X Other Staff Rep.                      (Name & Title) Tishura Dell, PCA & Med Tech		
Committee Members Present: Anita Tesh, Patti Liegl		Report Completed by: Patti Liegl
Number of Residents who received personal visits from committee members: 2 residents		
Resident Rights Information is clearly visible: x Yes <input type="checkbox"/> No		Ombudsman Contact Info is correct and clearly posted: x Yes <input type="checkbox"/> No
The most recent survey was readily accessible: <input type="checkbox"/> Yes <input type="checkbox"/> No (Required for Nursing Homes Only)                      N/A		Staffing information clearly posted: <input type="checkbox"/> Yes <input type="checkbox"/> No                      N/A
Resident Profile	Yes/No/NA	Comments/Other Observations
1. Do the residents appear neat, clean and odor free?	Yes	The residents observed were clean & neatly groomed.
2. Did residents say they receive assistance with personal care activities? <i>Ex. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses?</i>	See Note	Evidence of assistance with personal care was observed; eye glasses, clothing, shoes and socks were clean.
3. Did you see or hear residents being encouraged to participate in their care by staff members?	Yes	Residents appear to be happy and content in their home.
4. Were residents interacting with staff, other residents & visitors?	Yes	Residents interacted with staff very well and were very polite to CAC visitors.
5. Did staff respond to or interact with residents who had difficulty communicating or making their needs known verbally?	Yes	The facility was well staffed and staff were very attentive to their residents' needs.
6. Did you observe restraints in use?	No	
7. If so, did you ask staff about the facility's restraint policies?	NA	
Resident Living Accommodations	Yes/No/NA	Comments/Other Observations
8. Did residents describe their living environment as homelike?	Yes	Facility is a small house; clean, well maintained and safe.
9. Did you notice unpleasant odors in commonly used areas?	No	One of 3 staff members was preparing dinner which smelled divine.
10. Did you see items that could cause harm or be hazardous?	No	
11. Did residents feel their living areas were too noisy?	No	The TV was on a low volume and did not disturb conversation.
12. Does the facility accommodate smokers? Where? <input type="checkbox"/> Outside only <input type="checkbox"/> Inside only <input type="checkbox"/> Both Inside/Outside	No	None of the residents smoke.
13. Were residents able to reach their call bells with ease?	See note	This is a small house, with bedrooms off central living room. Call bells are not used. If residents were to call for help, they could be easily heard.
14. Did staff answer call bells in a timely & courteous manner? If no, did you share this with the administrative staff?	See note N/A	Staff observed being very attentive and respectful to residents.
Resident Services	Yes/No/NA	Comments/Other Observations
15. Were residents asked their preferences or opinions about the activities planned for them at the facility?	Not assessed	If a resident wants to go outside onto the deck, staff monitors.
16. Do residents have the opportunity to purchase personal items of their choice using their monthly needs funds? Can residents access their monthly needs funds at their convenience?	See note See note	Purchases made for residents and added to their bills or POA arranges purchases.
17. Are residents asked their preferences about meal/snack choices? Are they given a choice about where they prefer to dine?	Yes Yes	Meals individually prepared based upon diet & resident preferences.
18. Do residents have privacy in making and receiving phone calls?	Yes	Residents have private bedroom suites.
19. Is there evidence of community involvement from other civic, volunteer or religious groups?	Not assessed	
20. Does the facility have a Resident's Council? Family Council?	No See note	No specific family council, but family members are included in planning regularly.

Areas of Concern	Yes/No/NA	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> <p>None. This was a well maintained, well-furnished and designed small house that was appointed to be safe for seniors with mobility and/or cognitive challenges. Facility does not use call bells because all residents are within easy hearing range of staff at all times, and staff round regularly.</p> <p>(Note, the Livewell at 11476 Club Drive is very close by. Both homes have similar layout and staffing, but are separately licensed.)</p>	No	<p>Discuss items from "Areas of Concern" Section as well as any changes observed during the visit</p> <p>No areas of concern noted.</p>

This Document is **PUBLIC RECORD**. **Do not** identify any Resident(s) by name or inference on this form.  
**Top Copy** is for the Regional Ombudsman's Record. **Bottom Copy** is for the CAC's Records.