

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"/> Adult Care Home <input type="checkbox"/> Combination Home 95 bed ACH	Facility Name/Address: Carolina Meadows: The Fairways 700 Carolina Meadows Chapel Hill NC 27517
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Visit Date: 1-18-24	Time spent in facility: 52 minutes.	Arrival time: 2:04 pm
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Name of person exit interview was held with: Interview was held: in Person Phone

X Admin. SIC (Supervisor in Charge). Other Staff Rep. Sandy Mouras, Administrator & Denise Moody, Assisted Living Manager

Committee Members Present: Anita Tesh, Patricia Regan & Patti Liegl	Report Completed by: Patti Liegl
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Number of Residents who received personal visits from committee members: 10 residents, 2 family members & 2 employees

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
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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
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Resident Profile	Yes/No/NA	Comments/Other Observations
1. Do the residents appear neat, clean and odor free?	Yes	Residents were clean, neat & well groomed Residents with whom we spoke were pleased with the care received at the facility. Staff was busy with care and interactions observed were encouraging for residents. Residents in memory care "The Green" were cheerful and appeared to be excited for a birthday celebration. An employee, on his off time, played the piano for the residents. Some residents in "The Green" had difficulty communicating. A family member stated the food and care for her husband was good. Her only concern was the difficulty of transitioning the large screen TV to live feed for weekend and special sports events.
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>	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	
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	Residents with whom we spoke were very happy in their home. The facility was clean and in great condition. No residents are smokers. Pagers are used rather than call bells. Staff attentive, courteous to residents and assisting as needed. No call bells were observed.
9. Did you notice unpleasant odors in commonly used areas?	No	
10. Did you see items that could cause harm or be hazardous?	No	
11. Did residents feel their living areas were too noisy?	No	
12. Does the facility accommodate smokers? Where? <input type="checkbox"/> Outside only <input type="checkbox"/> Inside only <input type="checkbox"/> Both Inside/Outside	No	
13. Were residents able to reach their call bells with ease?	Yes	
14. Did staff answer call bells in a timely & courteous manner? If no, did you share this with the administrative staff?	NA N/A	

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?	Yes	Activity calendars showed many options & were posted in multiple places. An educational presentation on COVID, a classical music series and a game of Scrabble were ongoing while CAC was on site. Residents earn "Meadow Bucks" for participation in activities. The bucks are then used for weekly auctions. A half month activity calendar was in place for the residents in memory care. A family member in The Green noted it was very difficult to watch live TV in the living room. Directions to switch from TV applications to live TV (sporting events) are provided but difficult for the family member and weekend staff to follow.
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?	Yes Yes	Purchases are made for residents and added to their bills. Residents can also keep small amounts of cash.
17. Are residents asked their preferences about meal/snack choices? Are they given a choice about where they prefer to dine?	Yes Yes	Menus are provided weekly in residents' mailboxes.
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 Resident's Council? Family Council?	Yes Yes	
Areas of Concern	Yes/No/NA	Exit Summary
Are there resident issues or topics that need follow-up or review at a later time or during the next visit? The only issue that needed to be communicated with administration was the difficulty experienced in switching the TV in The Green for live sporting events.	No	. Staff throughout the facility was very welcoming to CAC members. Positive feedback was shared.

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.

Given to the administrator.