Comn	Community Advisory Committee Quarterly/Annual Visitation Report						
County: Chatham Facility Type: Family Care Home		Facility Name/Address: Coventry House of Siler City					
	Nursing Home Combination			260 Village Lake Rd Siler City, NC 27344			
X Assisted Living 66 bed with Memory Care Unit (currently closed)		nory Care		Silei City, NC 27344			
				3:17 pm			
Name of person exit interview was held with: Interview was held: X in Person Phone							
X Admin. SIC (Supervisor in Charge) Other Staff Rep. (Name & Title) Traci McLaurin, Executive Director							
Committee Members Present: Anita Tesh, Kevyn Immermann & Patti Liegl Report Completed by: Anita Tesh							
Number of Residents who received personal visits from committee members: 6 residents Resident Rights Information is clearly visible: X Yes Ombudsman Contact Info is correct and clearly posted: X Yes							
The most recent survey was readily accessible: Yes No Staffing information clearly posted: Yes No							
(Required for Nursing Homes Only)							
Resident Profile			Yes/No/NA	Comments/Other Observations			
Do the residents appear neat, clean and odor free?			Yes	Residents neatly groomed. Several female			
			169	residents wearing makeup and/or jewelry.			
2. Did residents say they receive assistance with personal care activities? Ex. brushing their teeth, combing their hair, inserting dentures or cleaning their eyeglasses?			Yes	Residents with whom we spoke were positive about the facility. One resident said, "Things have been going pretty good for me here."			
	ar residents being encouraged to partic	cipate in		During our visit, many residents were socializing			
their care by staff members?		•	Yes	in common areas. Staff member was observed gently assisting a resident who wanted to disengage from interacting with another resident.			
4. Were residents interacting with staff, other residents & visitors?		visitors?	Yes	Several residents socializing and watching TV together.			
	o or interact with residents who had di	ifficulty	Yes	Staff members were observed giving appropriate			
communicating or making their needs known verbally?				care to residents with communication needs.			
6. Did you observe restraints in use?7. If so, did you ask staff about the facility's restraint policies?			No NA				
	Accommodations	·	Yes/No/NA	Comments/Other Observations			
		ike?	Yes	All resident responses were positive, except for			
8. Did residents describe their living environment as homelike?			, , ,	one resident who was concerned about the noise caused by replacement of paper towel dispensers in restrooms. Staff reassured this resident, but the resident had difficulty understanding the explanation. Music was playing softly in the lobby; flowers were present in the lobby.			
9. Did you notice unpleasant odors in commonly used areas?			No	The facility smelled clean.			
10. Did you see items that could cause harm or be hazardous?11. Did residents feel their living areas were too noisy?		us?	No See note	Med carts were locked.			
			See note	Music was playing softly in the lobby. During our visit, paper towel dispensers in bathrooms were being replaced, causing some temporary noise which distressed one resident. Otherwise, no complaints.			
12. Does the facility accommodate smokers?		Not at this	No current residents are smokers.				
Where? Outside only		time					
13. Were residents able to reach their call bells with ease?14. Did staff answer call bells in a timely & courteous manner?		Yes Yes					
If no, did you share this with the administrative staff?		/i :	100				
Resident Service			Yes/No/NA	Comments/Other Observations			
15. Were residents as	ked their preferences or opinions about for them at the facility?	ut the	NA	Not addressed with residents during this visit. Several of the residents think they are at home or at work, not in a facility. The activity calendar was posted and showed a variety of activities.			

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?		Residents can keep small amounts of cash in their rooms, but it is discouraged. Funds for purchases are available in office.
17. Are residents asked their preferences about meal/snack choices? Are they given a choice about where they prefer to dine?		The menu for the upcoming week was posted. One entrée was offered for each menu
18. Do residents have privacy in making and receiving phone calls?		Phones are in the rooms and staff knock before entering.
19. Is there evidence of community involvement from other civic, volunteer or religious groups?		From activity calendar.
20. Does the facility have a Resident's Council? Family Council?		There is an open-door policy for families, as well as a regular email newsletter.

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?	No	Discuss items from "Areas of Concern" Section as well as any changes observed during the visit.
No items need follow-up.		Positive interactions and observations were shared with Ms. McLaurin. Staff and residents warmly greeted CAC members. Ms. McLaurin was quite aware of the resident who was distressed by the noise and was actively working to reassure and redirect her. CAC noted that the plants present in the facility include poinsettias, which are toxic if eaten. Ms. McLaurin explained that none of the current residents ever attempted to eat potted plants- if they did, poinsettias would not be used.

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