		nittee Qua	rterly/Anr	ual Visitation Report
County: Chatham Facility Type: Family Care Home X Nursing Home 90 bed SNF			Facility Name/Address: Carolina Meadows: The Pines 100 Whippoorwill Lane Chapel Hill NC 27517	
	Adult Care Home Combin	-		521311
Visit Date: 4/2/2024	Time spent in facility: 65 min		Arrival time:	2:41 pm
Name of person exit interview was held with: Interview was held:			X in Person Phone	
	C (Supervisor in Charge). X Other Sta			er-Phillips, BSN, RD, Director of Nursing
	resent: Patricia Regan & Sigi Markwo		Carol Dake	Report Completed by: Sigi Markworth
			s: 3 residents, 2	2 family/friends, 1 personal/private CNA
The most recent survey	ation is clearly visible: <b>X</b> Yes was readily accessible: <b>X</b> Yes			fo is correct and clearly posted: X Yes rly posted: X Yes
(Required for Nursing H Resident Prof			Yes/No/NA	Comments/Other Observations
				Residents we spoke with and others observed
	1. Do the residents appear neat, clean and odor free?		Yes	appeared to be clean, dressed neatly, and well 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> ?		Yes/No	Did not observe any interaction re. personal care at time of visit. One resident had a catheter output bag changed by staff. One personal/private CNA said that she feels client/resident was well taken care of and received good personal care.	
	3. Did you see or hear residents being encouraged to participate in their care by staff members?		No	Aside from catheter bag change, we did not observe any staff resident interaction in terms of personal care, but staff we did observe seemed very polite and positive in interaction.
4. Were resident	is interacting with staff, other residents	s & visitors?	Yes	Residents were observed interacting with each other and visitors.
	nd to or interact with residents who ha g or making their needs known verball		Yes	One of the residents we visited is hearing impaired, but we noted respectful interaction with staff by speaking up or repeating herself.
-	ve restraints in use? sk staff about the facility's restraint po	olioioo?	No NA	stan by speaking up or repeating hersen.
	isk stall about the lacility s restraint pt			
Resident Livir	a Accommodations			Comments/Other Observations
	ng Accommodations		Yes/No/NA	Comments/Other Observations
8. Did residents o	escribe their living environment as ho	omelike?	Yes/No/NA Yes	All but 1 stated that they are happy with care and environment. One person and visitors, who did not want to be identified, were not happy and stated that 1 particular staff was "brusk". We (and attending friends/visitors) attributed this to recent changes in environment and with resident wanting to be "home". Friend said that "she just wants to go home, and no facility would make her happy".
<ol> <li>B. Did residents of</li> <li>9. Did you notice</li> </ol>		omelike? areas?	Yes/No/NA	All but 1 stated that they are happy with care and environment. One person and visitors, who did not want to be identified, were not happy and stated that 1 particular staff was "brusk". We (and attending friends/visitors) attributed this to recent changes in environment and with resident wanting to be "home". Friend said that "she just wants to go home, and no facility would make her happy". The facility was clean and odor free. The hallways were clear and no safety hazards
<ol> <li>B. Did residents of</li> <li>9. Did you notice</li> <li>10. Did you see ite</li> </ol>	unpleasant odors in commonly used	omelike? areas?	Yes/No/NA Yes No	All but 1 stated that they are happy with care and environment. One person and visitors, who did not want to be identified, were not happy and stated that 1 particular staff was "brusk". We (and attending friends/visitors) attributed this to recent changes in environment and with resident wanting to be "home". Friend said that "she just wants to go home, and no facility would make her happy". The facility was clean and odor free. The hallways were clear and no safety hazards were noted. Same resident (above 8) who did not want to be
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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	Per previous visits/reports, purchases are made for residents and added to their bills.
17. Are residents asked their preferences about meal/snack choices? Are they given a choice about where they prefer to dine?	Yes Yes	No menu is posted- instead residents receive a weekly menu to choose their meals. If needed, the residents' family may choose and lastly, choices are computer selected.
18. Do residents have privacy in making and receiving phone calls?	Yes	Phones in rooms
19. Is there evidence of community involvement from other civic, volunteer or religious groups?	Yes	Activity calendar shows involvement
20. Does the facility have a Resident's Council? Family Council?	Yes Yes	This was not discussed on this visit; however, family council met monthly in the past.
Areas of Concern	Yes/No/NA	Exit Summary
Are there resident issues or topics that need follow-up or review at a later	Yes	Discuss items from "Areas of Concern" Section
time or during the next visit?	105	as well as any changes observed during the visit.

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.