Community Advisory Committee Quarterly/Annual Visitation Report

County: Wake	Facility Type: ☐Family Care Home ☐Nursing Home X Adult Care Home	Facility Name/Address: Lawndale Manor
Visit Date: 8 / 17 / 2022	Time spent in facility: 1 hr	Arrival time: 12:30 am X pm

Name of person exit interview was held with: Executive Director — Interview was held: X in Person ☐ Phone
X Admin. ☐ SIC (Supervisor in Charge) ☐ Other Staff Rep.

Committee Members Present: Two Volunteers	Report Completed by: Volunteer
Number of Residents who received personal visits from committee members: 5	
Resident Rights Information is clearly visible: X Yes ☐ No	Ombudsman Contact Info is correct and clearly posted: X Yes ☐ No
The most recent survey was readily accessible: ☐ Yes ☐ No (*Required for Nursing Homes Only*)	Staffing information clearly posted: ☐ Yes ☐ No

Resident Profile	Yes/No/NA	Comments/Other Observations
1. Do the residents appear neat, clean and odor free?	Yes	4. One resident was chatting with a CA while sitting in the hallway
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	
3. Did you see or hear residents being encouraged to participate in their care by staff members?	N/A	3.Residents stated they dress themselves as it supports their independence.
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?	N/A	
6. Did you observe restraints in use?	No	
7. If so, did you ask staff about the facility's restraint policies?		

Resident Living Accommodations	Yes/No/NA	Comments/Other Observations
8. Did residents describe their living environment as homelike?	Yes	All rooms visited seemed homelike with family pictures, stuffed animals, art on walls, etc.
9. Did you notice unpleasant odors in commonly used areas?	No	One resident's room had several empty 6oz cups scattered on her eating space. This resident also stated that she does not get enough liquids to drink.
10. Did you see items that could cause harm or be hazardous?	No	
11. Did residents feel their living areas were too noisy?	Yes	12. One resident complained that he could not sleep during the early morning hours because staff was so noisy in the hallway outside of his room.
12. Does the facility accommodate smokers? Where? ☐ Outside only ☐ Inside only ☐ Both Inside/Outside	N/A	
13. Were residents able to reach their call bells with ease?	N/A	
14. Did staff answer call bells in a timely & courteous manner? If no, did you share this with the administrative staff?	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	One resident complained that a staff member was extremely rude during a meal period. Another complained that he does not get food that he likes (steak).
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?	N/A N/A	
17. Are residents asked their preferences about meal/snack choices? Are they given a choice about where they prefer to dine?	No Yes	
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?	N/A	20.Comments were made that the facility managers do not participate in Resident Council meetings
20. Does the facility have a Resident's Council? Family Council?	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? 1. ED advised CAC Volunteer that a new drinking system was being installed in the hallways which would give residents better access to water. 2. The one staff member who was rude to a resident has been reprimanded. 3. The ED was informed about the resident who is disturbed by early morning staff noise 4. The ED is aware of discrepancies in the menus and actual food served and stated that the issue was being addressed.	Yes	Discuss items from "Areas of Concern" Section as well as any changes observed during the visit The ED was informed of the complaints made regarding limited opportunities for drinking water, menus don't reflect actual meals, and non-participation of management in Resident Council meetings. The ED was informed about the treatment one resident received from a staff member.