



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Churchills AFH	LICENSE NUMBER AH346900
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NOTE: The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see [Chapter 388-76](#) of Washington Administrative Code.

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About the Home	
1. PROVIDERS STATEMENT (OPTIONAL) The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home. Churchills AFH strives to give excellent, quality care for the elderly with Dementia and Mental Health issues. Owners live in home and by doing so know exactly what issues may or may not be going on at all times. 80 to 90 per cent of time there is 2 caregivers on duty. Churchills has an in home Practitioner for health issues. We are Nurse Delegated. We are also delegated for Diabetes. If need arises, have availability of Skilled Nursing, P.T, O.T., X-Rays. True home atmosphere you're looking for	
2. INITIAL LICENSING DATE 09/01/1996	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
5. OWNERSHIP <input checked="" type="checkbox"/> Sole proprietor <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	

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Personal Care

"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

1. EATING

If needed, the home may provide assistance with eating as follows:

Monitoring, cueing and total assist. True home cooking and specialty meals per resident.

2. TOILETING

If needed, the home may provide assistance with toileting as follows:

Monitoring, cueing and total assist

3. WALKING

If needed, the home may provide assistance with walking as follows:

Monitoring, cueing and total assist

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

Monitoring, cueing and total assist

5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

Monitoring, cueing and total assist

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

Monitoring, cueing and total assist

7. DRESSING

If needed, the home may provide assistance with dressing as follows:

Monitoring, cueing and total assist

8. BATHING

If needed, the home may provide assistance with bathing as follows:

Monitoring, cueing and total assist

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Churchills, DSHS and or state certified assessor to assess as needs change.

Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

All levels of of assistance with Nurse Deleg. as allowed by Wa. State Regulations.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Nurse Deleg. and monitored every 90 days to ensure Wa.state regulations.

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Skilled Nursing Services and Nurse Delegation

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

All skilled nursing services allowed by Wa. State Reg. with Nurse Deleg.

The home has the ability to provide the following skilled nursing services by delegation:

All skilled nursing services as allowed by Wa. state reg. and nurse deleg. reg.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Churchills strives to provide the utmost excellance in skilled care as allowed by Wa. state reg.

Specialty Care Designations

We have completed DSHS approved training for the following specialty care designations:

- Developmental disabilities
- Mental illness
- Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

Churchills has over 20 yrs. experience in providing care for Dementia and Mental Health residents.

Staffing

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- The provider lives in the home.
- A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- Registered nurse, days and times: _____
- Licensed practical nurse, days and times: As needed
- Certified nursing assistant or long term care workers, days and times: 3 and 1 half caregivers 7 days a week
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Night staff as needed for special circumstances. 2 staff has been with home for 8-10 yrs. 1 over a yr.

Cultural or Language Access

The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)

The home is particularly focused on residents with the following background and/or languages:

English speaking only. Will accept all ethnic backgrounds.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Home has english speaking caregivers, but will accept and accomadate all ethnic backgrounds.

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Medicaid

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)

The home is a private pay facility and does not accept Medicaid payments.

The home will accept Medicaid payments under the following conditions:

Home accepts medicaid residents per rate matches care level.

ADDITIONAL COMMENTS REGARDING MEDICAID

To be discussed

Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

Craft and exercise , per residents abilites.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

To be discussed per residents preferences and abilites.

Please Return the completed form electronically to AFHDisclosures@DSHS.WA.GOV

The form may also be returned by mail at:

RCS – Attn: Disclosure of Services

PO Box 45600

Olympia, WA 98504-5600

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