



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <i>Ndidi' Ndidi' / Odopmene</i>	LICENSE NUMBER <i>432001</i>
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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. <i>Our goal is to provide for residents, a comfortable safe environment where they feel at home.</i>	
2. INITIAL LICENSING DATE <i>5/29/2002</i>	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4. SAME ADDRESS PREVIOUSLY LICENSED AS: <i>2123 S 248th Street, Kent WA 98032</i>	
5. OWNERSHIP <input checked="" type="checkbox"/> Sole proprietor <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	<div style="font-size: 1.2em; font-weight: bold;">Received</div> <div style="font-size: 1.2em;">NOV 19 2015</div> <div style="font-weight: bold;">RCS/Public Disclosure</div>
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: Feed resident if he/she is not able to do so. Home is also capable of accommodating residents on special diet such as ADA, pureed, mechanical or tube feeding.

2. TOILETING

If needed, the home may provide assistance with toileting as follows: Stand by to total assistance. We are also able to care for residents with indwelling catheter.

3. WALKING

Carry out walking exercises as prescribed by the physical therapy. If needed, the home may provide assistance with walking as follows: Provider supervision for a resident who uses a walker, cane. Home also do take residents out for a walk if their medical condition allows that.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: Standby to one person assist. Home has Hoyer lift available to transfer people who are non weight bearing.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: Partial to total assist with positioning. Resident that are able will receive stand by assist. but the ones that are total care or are unable to help are done every 2 hrs by staff.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: Combing hair, brushing teeth shaving, washing face, apply lotion, deodorant, the assistance ranging from cueing to the staff actually performing the task for the resident.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: Helping them to pick out their clothes, lining them to dress or outright dressing them if they are too sick, confused and unable to help with the process.

8. BATHING

provide the right water temp. If needed, the home may provide assistance with bathing as follows: - provide stand by assist to bed bath as needed. Resident who can't help with bathing will be given shower/bath as needed. make sure the house temp. is right.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We provide nail care for diabetic residents. House has roll-in shower.

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: the home gives residents their medication as ordered. Record the medication on the MAR. Home will re-order meds as needed.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Residents who require meds crushed or ointments applied, will receive these services by nurse/delegate nursing assistants.

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: Ours is RN provider Home. We are able to provide wound care, catheter, gastric tube feeding.

The home has the ability to provide the following skilled nursing services by delegation: Application of all types of ointment, Blood sugar check & assistance with insulin injection, tube feeding, crushing pills, PRN medications.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION Nursing assistance
can perform some skilled services under the delegation of a registered nurse such as blood sugar checks

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 RN provider has strong geriatric & mental health background from Hospital Inpatient

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: The provider is RN and available day/night
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: 24 hours
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING We staff the home according to acuity. Will have awake staff if there is a resident needing it.

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, Swahili, Samoan

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS Has someone who can interpret for German speaker

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: RN provider feels that she & her staff can provide the care needed.

ADDITIONAL COMMENTS REGARDING MEDICAID

Private pay resident need to notify provider 2-3 prior to conversion to medicare

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: Arts & Crafts, Knitting, Card games, puzzles Bible Study, movie, music, staff will make transportation arrangements

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Residents are encouraged to register with senior citizen center for fun activities.

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