



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Ridge View AFH LLC/Veniza Seward	LICENSE NUMBER 517600
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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.

Our home is a private residential home licensed to provide Long Term Care (LTC) to vulnerable adults and elderly who needs necessary supervision and monitoring of medication, from minimal to total physical assistance with personal care to meet the needs with activities of daily living (ADL's), a bed in private or shared room, chores/ laundry, and assist with other social service activities to ensure enjoyment and quality of life in later years while living in a home environment. RCW 70.128.010.

2. INITIAL LICENSING DATE

05/25/2000

3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:

3898 NW Windy Ridge Rd. Silverdale, WA 98383

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

Ridge View AFH LLC

5. OWNERSHIP

- Sole proprietor
- Limited Liability Corporation
- Co-owned by:
- Other:

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:

Prepares food as directed in current care and service plan, bring food to client, encourage liquids/keep available, provide calm environment, cue to chew and swallow food to prevent food aspiration throughout meal, cue and encourage client participation to feed self if able to do so. Include intake of nourishment by other means as prescribed by physician with close monitoring and document report for any changes and seek assistance immediately if client's eating ability declines.

2. TOILETING

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

Follows service plan, maintain inventory of toileting supplies and provide proper tools for use with toileting. Encourage/cue/assure safety of client during participation with perineal care, transfer on/off toilet, changing and securing of soiled disposable incontinence garment, monitor and assist with physical ability to toilet self, document and report changes for further assessment with activity. Change soiled clothing as needed and use of reusable cloth pad that can be laundered and reused.

3. WALKING

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

Provides safe, secured, well lit access for mobility and ensure mobility tools are in good working condition for ambulation. Assist, monitor and document client's changes with health/physical ability and report for proper evaluation and assessment. Provides proper assistance/direction during an emergency evacuation. Offer and encourages participation with walking to maintain health mobility and safety.

4. TRANSFERRING

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

Follows client service plan with transferring needs, inform client of activity-direct, cue, ensure safety while transferring from chair, bed, toilet, shower, car...encourage to participate use of tools such as grab bars if client is weight bearing, use transfer belts and secure tools for safety. Provide client range of motion exercise and incorporate during activities to maintain physical ability and use of motor skills.

5. POSITIONING

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

Follows the required service and care plan with transferring assistance over thresholds, monitor pressure points, cue and direct for proper use of tools: wheelchair/walker, ensure foot rest in place, set brakes on/off, reposition every two hours, encourage, assist or remind to position self if able, keep tools dry, clean and in good condition. Report any skin concerns, offer and encourage to drink plenty of liquids.

6. PERSONAL HYGIENE

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

Provides assistance with oral hygiene care, keep dentures clean-soak in cold water with denture cleanser in proper container when not in use, shampoo/combing hair, shaving, applying body lotions/deodorants, peri care, nail care (except podiatric care is needed), washing of hands and face as needed, encourage participation during activity, ensure personal grooming supplies available for resident's use; monitoring

and documentation of any concerns and reports to authority.

7. DRESSING

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

Provides assistance when puts on, fasten, and takes off clothing items, including donning/removing prosthesis. Helps with preparation and laundry/maintenance of clothing, footwear and tools necessary for use. Encourages participation, asks/honor preferences, offer mirror use for approval of looks. Inform POA of alternative clothing/item that may be necessary for client's comfort, safety, and appropriate to meet medical and physical needs. Ensure clothing is appropriate for weather condition.

8. BATHING

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

Provide one person assistance to meet personal hygiene as agreed on service plan. Offers bathing at least once every week, as needed, according to resident's physical health condition. Ensure bathing equipment are clean and in good condition, bathing supplies/items are available, monitor water temperature and proper positioning while bathing, use items as prescribed if any for hair/body use, monitor skin, provide privacy, encourage participation and document reports for any skin concern/issue.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Ridge View AFH LLC will accommodate residents who need a one person per caregiver assistance daily.

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:

Assistance with resident self-administration, accommodation of RN delegated tasks for client medication administration as needed and to ensure home's compliance under WAC and RCW as required by law.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Storage and assistance with medication refills, medical equipment/tools and supplies for personal use.

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:

Assistance and coordination with resident's personal physician who authorizes for a local home health service provider for home health services to meet required residents needs and as agreed per care plan.

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

Staff is certified ready for RN delegation assistance tasks and medication administration as needed.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

If other RN delegated task is needed and required, home will obtain approval prior to providing services.

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

The home has all three AFH Specialty Training as required to accommodate and meet resident's needs. Meets yearly required Continuing Education (CE), current active licenses, registrations, authorized background check, health and physical conditions certification while caring for residents in the home.

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: **Palliative Care/Hospice, Home Health Provider Services are available per resident's/POA, personal physician's and per Medicaid or private payment authorization.**
- Licensed practical nurse, days and times: **Accommodates as needed per resident's health/medical condition changes and whenever there are changes in assessment with plan of care and services.**
- Certified nursing assistant or long term care workers, days and times: **One person assistance available daily.**
- Awake staff at night
- Other: **Awake staff is available from 7am-10pm and will monitor residents as needed at night for safety. If a resident requires an extra full-time awake night staff, we will try to accommodate with extra service charges/fees for care and the resident's responsibility as agreed. Provider lives in the home and is available regarding all residents well-being, for any inquiry and in case of an emergency.**

ADDITIONAL COMMENTS REGARDING STAFFING

If client wish/requires outside activity, client must provide transportation and pay cost for extra services.

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:

The Provider is of Asian descent and speaks Tagalog fluently, but English is the main language use and spoken at home. Our home will accommodate residents of other social, cultural and ethnic backgrounds. We assist with respect to finding appropriate community resources that meet resident's choice of spiritual groups, community associations that may be related to country of origin, and other support system that may encourage resident's ability to maintain and practice own personal traditions.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

If resident/client/POA/Guardian is unable to communicate in english, the POA/Legal Guardian must provide interpreter to ensure care assesment, contract and pertinent documents regarding resident's personal care service needs are understood prior to placement in the home. Provider will ensure to accommodate residents cultural and ethnic backgrounds with appropriate food preparation and activities, reading materials in a language understood to enhance quality of life while living in the home.

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:

Provider accepts Medicaid and Private pay as form of payment source for care and services. Client must fully disclose source of payment during inquiry for placement; anytime there is a change with resident/client's payment status while in the home to ensure continuance of care and services. Provider will inform DSHS of changes with pay status from Medicaid to Private Pay, health condition and updates of care service assessment. Private pay resident transition must get Medicaid approval.

ADDITIONAL COMMENTS REGARDING MEDICAID

Private pay client must get Medicaid eligibilty approval prior to status change as payment source.

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:

All in-home ADL's to be provided by assigned staff and only provided if client is able or choose to participate with required or preferred activity, which may enhance stimulation, recreation and promotes well being while at home. Home Provider will do the utmost care and considerations to residents preferred activity inside the home to maintain physical, emotional, mental and meet social needs and interests. All activities being provided and assisted residents with must correspond to their needs, health and physical ability to perform for enjoyment. Provider will ensure activity area is safe, free of clutter, tools/supplies in good condition and available for use in the home. Ensures resident is ready when there are scheduled and authorized outside activity for medical or outing with family. Offers option/alternative to help resident continue to enjoy the activity of choice. Documenting and monitoring of behavior changes, apply new options/ideas helped when resident shows progress/interest with new activity. Incorporate range of motions (ROM) participation, may keep resident expectations and interest with ADL's. Keeps home clean, free of clutter, well lit, fresh and inviting, electronics and other appliances at minimum low volume-for a more soothing and relaxing environment for residents to enjoy. Any activity is better than nothing...improvise one that may be attending to resident's mood at the moment. Music always seemed to help with resident's resistance and enhance involvement with activity. Caregiver approaches all residents with calm and respectful manner, monitor for safety, comfort, give time to self and privacy. Residents has the right to refuse activity...reintroduce and respect choices appropriately.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

The home assists with outside activities with consent with scheduling if resident is all able to participate. The authorized family member/friends may take resident for outings if resident wishes. The provider will ensure assistance with arrangement of transporation for acivity, and encourage residents, family and friends' participation in other senior outreach programs the home actively supports for continuance and promotes social involvement in the local adult and elderly community.