



Adult Family Home Disclosure of Services Required by RCW 70.128.280

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| HOME / PROVIDER AR Care Adult Family Home LLC | LICENSE NUMBER 561501 |
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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.

AR Care Adult Family Home LLC was organized in 2005 with a vision of maintaining a high standard level of services to its clients. A 24-hour personalized care giving, utmost respect and importance to each Client's health, dignity, and privacy is the primary mission of the provider with the assistance of certified and experienced caregivers.

AR Care Adult Family Home LLC is committed to provide a comfortable, compassionate, and tender caring home so the Clients feel secure and loved.

2. INITIAL LICENSING DATE

05/25/2005

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

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

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:

According to the Client's Assessment and negotiated Care plan

2. TOILETING

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

According to the Client's Assessment and negotiated Care plan

3. WALKING

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

According to the Client's Assessment and negotiated Care plan

4. TRANSFERRING

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

According to the Client's Assessment and negotiated Care plan

5. POSITIONING

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

According to the Client's Assessment and negotiated Care plan

6. PERSONAL HYGIENE

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

According to the Client's Assessment and negotiated Care plan

7. DRESSING

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

According to the Client's Assessment and negotiated Care plan

8. BATHING

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

According to the Client's Assessment and negotiated Care plan

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

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:

According to the Client's Assessment and negotiated Care plan-with AR Care nurse delegation services

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

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:

Wound care services such as sterile dressings provided by in home Visiting Nurses, Hospice care provided by Providence hospice

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

Insulin shots, medications, topical lotions, eyedrops

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

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

In addition to above, AR Care also specializes in Alzheimer's.

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: _____
- Certified nursing assistant or long term care workers, days and times: **7 days/week, 24 hours a day**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

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:

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

AR Care accepts any resident no matter what their cultural background or ethnicity is.

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:

AR Care Adult Family Home reviews the Assessments prior to acceptance into the Home.

ADDITIONAL COMMENTS REGARDING MEDICAID

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:

According to Client's Assessment and negotiated care plan.

ADDITIONAL COMMENTS REGARDING ACTIVITIES