



Adult Family Home Disclosure of Services Required by RCW 70.128.280

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| HOME / PROVIDER Sound Care -II AFH, LLC - Thelma Suaviso and Al Suaviso | LICENSE NUMBER 610000 |
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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.

It is our mission to provide a professional, safe and excellent care to our residents with love, compassion, respect and dignity by promoting their general welfare and well being to the best of our ability regardless of their physical, psychological, emotional, and social condition.

2. INITIAL LICENSING DATE

02/14/2003

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

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

7260 14th Avenue SE Lacey, WA 98503

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:

Provide meal preparation, supervision, cueing and feeding to the residents either with regular food, pureed, diabetic, and other nutritional food and drinks as specified and prescribed.

2. TOILETING

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

Provide supervision, and assistance (partial or total) with the residents toileting needs. Timed toileting and incontinent care management may be implemented.

3. WALKING

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

Provide supervision and assistance with residents ambulation with or without ambulation device such as walker and wheel chair.

4. TRANSFERRING

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

Provide assistance with either one or two person transfer. Use of sliding board, Sit- to Stand and Hoyer Lift may used as indicated on the care plan.

5. POSITIONING

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

Provide one or two person as needed for positioning of the resident. Positioning pillows, neck support, use of reclining chair or bed as indicated on the care plan.

6. PERSONAL HYGIENE

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

Provide supervision, cueing and assistance to daily personal hygiene need of the resident such as washing the face, washing hands, brushing teeth, brushing hair and shower. Provide assistance to help identify, encourage and promote remaining cognitive and functional ability to perform the chore.

7. DRESSING

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

Provide daily supervision, cueing and assistance with clean clothes and help identify, encourage and promote their remaining cognitive and functional ability to perform the chore.

8. BATHING

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

Provide supervision and assistance (either one or two person) with the residents bathing need 2 to 3 times a week or as frequently as needed. Provide assistance to help identify, encourage and promote the remaining cognitive and functional ability to perform some parts of the chore. Bed bath will be rendered to bed bound residents.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Individual differences and idiosyncracies of the residents are considered when providing 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:

Provide assistance with oral, eye drops, topical, and suppositories. Nurse delegated medications administration by the care staff may be implemented as indicated in the care plan.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Nurse delegation for medication administration is delegated by an RN and reviewed within 90 days.

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:

This facility is owned and managed by an RN BSN with a current hospital practice. The RN will provide general health assessment and procedure (as allowed by State of WA Board of Nursing- Scope of Practice) such as, but not limited to catheter insertion, administer intramuscular injection, intravenous injection, wound care and dressing as needed and as prescribed by an MD. Services of Home Health Nursing (Providence or Assured) will also be utilized as indicated and ordered by the PCP.

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

All care staff are trained and with certificate to provide nurse delegated medication administration including subcutaneous insulin injection, oral, eye drops, topical, suppository, and procedures such as clean technique of wound dressing and clean technique of catheter care.

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

We also provide care to diabetic insulin dependent, stroke with mild to moderate neuro deficits, with heart disease, Multiple sclerosis, Parkinsons, colostomy, indwelling catheter, on tube feeding, on oxygen, wheel chair/ bed bound and on Hospice.

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: **7 days a week, otherwise on call. RN reliever may be hired when on vacation**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **Minimum of 2 staff 7 days a week.**
- Awake staff at night
- Other: **Considered non-awake staff at night from 12 midnight to 6 AM. Required to wake up and attend to the residents when needed.**

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:

Prefers English speaking. Can also speak Tagalog.No cultural preferences.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

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:
Will accept Medicaid after at least 2 years of being private pay.

ADDITIONAL COMMENTS REGARDING MEDICAID

Will accept Medicaid with E- Medium and E-High service code classification.

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:

Activities will be provided to residents such as card games, bingo, catching ball, domino, puzzle, group exercise, watching movie and TV games and shows, reading and story telling, and outdoor (patio) picnic. Walk or wheel chair ride in the neighborhood.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

All activities will be based on the individual resident and participation level.