

## Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <p style="text-align: center;">patty's house/ Patty Rio AFH Provider</p>	LICENSE NUMBER <p style="text-align: center;">670600</p>
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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.

### Table of Contents

- [About the Home](#)
- [Personal Care](#)
- [Medication Services](#)
- [Skilled Nursing Services and Nursing Delegation](#)
- [Specialty Care Designations](#)
- [Staffing](#)
- [Cultural or Language Access](#)
- [Medicaid](#)
- [Activities](#)

<b>About the Home</b>	
<p>1. PROVIDERS STATEMENT (OPTIONAL)</p> <p>The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home.</p> <p>Our house provides care for a variety of clients with medically diverse conditions. We cook our own meals and provide diverse diets. For some of our residents food is one of the activities they can enjoy. We try to engage family's to providing pleasant activities and time together with our residents. We believe the most impact we can have on our residents is to provide a peaceful, clean and organized place for them to call home. Our staff motto is, Organize, Prioritize and Anticipate.</p>	
2. INITIAL LICENSING DATE	<p>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</p> <p style="text-align: center;"><b>Azalea St, Port Orchard WA, / Sedge wick Rd., Port Orchard WA. 98367</b></p>
<p>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</p> <p><b>NA</b></p>	
<p>5. OWNERSHIP</p> <p><input type="checkbox"/> Sole proprietor X</p> <p><input type="checkbox"/> Limited Liability Corporation</p> <p><input type="checkbox"/> Co-owned by:</p> <p><input type="checkbox"/> Other:</p>	
<b>Personal Care</b>	
<p>“Personal care services” means both physical assistance and/or prompting and supervising the performance of direct</p>	

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: from setup to feeding, and feeding tube feeding. Special diets.

2. TOILETING

If needed, the home may provide assistance with toileting as follows: Help with clothing , on and off, assist with getting on toilet, setup of commodes , incontinent of bowel and bladder, cath.care.

3. WALKING

If needed, the home may provide assistance with walking as follows: assist and supervision of ambulatory residence. Therapy as directed by HC Professional.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: One or two person assist, hooyer lift.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: All bed bound residents are on a turn schedule. Any resident with behaviors or signs of breakdown are on a positioning sch.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: All personal tasks we will assist or do for our residents. Foot care , other than our dremel or file is done by a professional.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: Our staff will dress or assist as needed, in clean appropriate clothing.

8. BATHING

If needed, the home may provide assistance with bathing as follows: Bed baths or showers. We will assist or do for residents. At least 2 X wkly., and as needed.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE; Most of our residents require ROM once or twice 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: Med. Assistance and med. Administration can be done here as per doctors orders. All information is signed off in MARs.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES. We are all Diabetic certified and Nurse delegateable to assist will this.

### 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: Any task within the scope of nurse delegation.

The home has the ability to provide the following skilled nursing services by delegation: Any task within the scope of nurse delegation.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION. Careplus, Donna Rowdey RN is our nurse delegate.

### 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

### 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.x
- 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: NA \_\_\_\_\_
- Licensed practical nurse, days and times: NA \_\_\_\_\_
- Certified nursing assistant or long term care workers, days and times: 24 hrs. a day, 2<sup>nd</sup> staff available during the day for assists or other.
- Awake staff at night; Depending on all residents NCP,
- Other: Bed checks at 10pm, 12am, 2am, and 4am. Will do turning schs. At these times.

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: English

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: X Medicaid payment must be at least \$100.00 per day to cover operating costs.

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: Television in rooms. Kitsap library books on tape and DVDS. Hobby materials that residents have shown and interest in. Because our residents usually have an illness that prevents movement or have cognitive impairment the makes them unable to participate , w/games cards, craft, we feel our time spent with residents, talking while feeding, interaction throughout the day , time spent with each of them is an activity. When we have residents that can participate, we have an exercise lady that comes in 2x's a week.

ADDITIONAL COMMENTS REGARDING Activities. We have a great landscape and deck. In good weather residents can watch the ships and boats on the bay and enjoy the salt air.