



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <i>Pacific Country home, LLC Heidi Zimmerman</i>	LICENSE NUMBER <i>750286</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>I took over the established AFH in 2007. I was the house manager for 8yrs-1999-2007 & ran the inside of the home, now being the owner of 8yrs=16hrs total being involved to our elderly residents, giving them a safe, secure home to call their own, family oriented w/ professional knowledge and care + years experience</i>	
2. INITIAL LICENSING DATE <i>2-7-2007</i>	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: <i>None</i>
4. SAME ADDRESS PREVIOUSLY LICENSED AS: <i>N/A</i>	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	

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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: We will provide the assistance that is needed for each individual. Our home encourages our residents to maintain as much independence as possible by cueing + monitoring. If needed our caregiver's will feed, prepare + present meals according to their needs

2. TOILETING

If needed, the home may provide assistance with toileting as follows: Our home provides toileting assistance from cueing to monitoring; to hands on physically helping residents on + off toilet or commode. Caregivers provide any assistance needed to allow resident + dignity.

3. WALKING

If needed, the home may provide assistance with walking as follows: We encourage independence when able + can't do walk/stand by assist @ all times with residents that are considered a fall risk.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: We have a hooyer to help when the time comes for two people assist. also-pull-up bars from ceiling to floor to help resident to stand-pivot transfer's as well.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: We monitor residents every 1-2 hrs as needed while residents are in bed daily or just evening to bed when needed, use wedges, pillow's to float heels + feet + for comfort.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: Our home on all residents independent or not, monitor every Am + P.M care on all types of care or levels that are needed.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: Our home encourages independence and prompts, cues residents to use as much of their A.D.L.'s. Our motto is "if you don't use it" you will loose it" which is the ability to age w/ grace.

8. BATHING

If needed, the home may provide assistance with bathing as follows: Our home, no matter what level of care are hands on for safety. We stay in shower room @ all times, but give privacy by shutting curtain. We help on all aspects of bathing care.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We check skin during showers daily + twice a week. Caregivers monitor daily when getting dress + undress on personal care to be addressed.

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:

Amanda Burgoyne-RN is our Nurse delegatar + Admit Nurse

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We set up, que, monitor, do med sheets, fax Dr's for orders, PC's, we're able to do insulin-diabetes-we bubble pack through high school pharmacy unless-Kaiser patient.

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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:

Range of motion, hands on stand by assist, hoist for lift-transfers

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

Glucose / Diabetes care - MS care - catheter care - I.N.R draws

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

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: Amanda Burgoyne is our "Nurse delegator" 24hrs available to us -> m-s
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: m-s 7-3pm - 3pm-11pm 11pm-7am
Days Swings noc
- Awake staff at night 24hrs a day scheduled - weekends, usually longer shifts.
- Other: _____

ADDITIONAL COMMENTS REGARDING STAFFING

Our caregivers have + will do 8hr, 12hrs + 16hrs shifts when needed

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)

We serve 3-meals a day + snacks if desired. We ask each and every resident their desire to their liking. make replacement meals

The home is particularly focused on residents with the following background and/or languages: English - white - any culture of any kind accepted

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

We accept anyone who needs love + care

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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:

ADDITIONAL COMMENTS REGARDING MEDICAID *If private pay has been given for 5yrs or if before + I'm down a medicaid bed come convert. I only accept two medicaid clients at one given time.*

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: *we do more one on one with each resident + their desires, needs to their wishes. we offer, puzzles, bubble blowing, crafts, Balloon, volley ball, movie night and outings if choose too.*

ADDITIONAL COMMENTS REGARDING ACTIVITIES *most of clients - choose not to participate, not understand, can't see or hear to join, antisocial - pain or to tired.*

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