



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

HOME / PROVIDER <b>Agape Home Care L.L.C. / Buzas Calin</b>	LICENSE NUMBER <b>751006</b>
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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.

**We strive to provide a family environment characterized by Dignity, Respect and Compassion.  
This home is family owned and operated. Calin Buzas (Nursing Assistant Registered) and Marinele Buzas (Register Nurse)**

**2. INITIAL LICENSING DATE**

**07/11/2008**

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

**None**

**4. SAME ADDRESS PREVIOUSLY LICENSED AS:**

**None**

**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:

**We serve 3 nutritious meals daily, snacks and beverages. Special dietary needs will be accommodated (cardiac, diabetic diet). Individual food preferences will be taken into consideration. Per client’s preference and doctor’s order we assist with cutting food in small pieces, alter food textures and help with the feeding. We Monitor appetite, PO intake, weight, chewing, swallowing and report changes from baseline to the family and the doctor.**

### 2. TOILETING

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

**Encourage and attempt toileting client at regular intervals during awake hours. Assist with or transport client to the bathroom. Assist with/ transfer client on the toilet. Cue client to eliminate. Allow privacy but also monitor for safety. Monitor elimination and report to family and doctor changes from baseline. Change dirty clothing or diapers promptly and cleanse skin thoroughly, Apply barrier cream to peri area and monitor/ report changes from baseline.**

### 3. WALKING

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

**Stand by (arm length distance from client) or contact assistance (hand on client) when client ambulates. Use Gait belt, cane, walker or wheelchair, whichever appropriate. Keep floor clean and free of clutter. Monitor and report changes in client's ability to ambulate to family and doctor.**

### 4. TRANSFERRING

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

**Evaluate client’s ability to bear weight and pivot and assist accordingly. Give instructions using simple wording. Use Gait belt, transfer pole, beard or Hoyer lift whichever appropriate. Give initial push to stand up and assist client to complete the transfer. Remind client to call for assistance with transfers and check frequently to ensure client does not attempt transferring unattended. Monitor and report changes from baseline to family and doctor.**

### 5. POSITIONING

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

**Encourage client to reposition if able. Assist with reposition (use pillows to steady body in good alignment, keep the heels off the mattress). Reposition client every 2-3 hours when he/she is in bed. Use alternating air pressure overlay mattress and cushions in the chairs. Monitor skin appearance especially over the bony prominences for redness that persists after 5 min. and report to family or doctor.**

### 6. PERSONAL HYGIENE

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

**Set up toiletries. Encourage client to perform as much as able. Assist with or perform all aspects of personal hygiene, if client is not able. Monitor skin and nail’s appearance and report changes from baseline to family and doctor.**

### 7. DRESSING

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

**Caregiver will make sure client is clean and dressed nice at all the times. Allow client to choose their clothes. Encourage and cue client to participate in dressing/undressing. Assist with dressing and undressing client daily and as needed when clothes are soiled. Monitor clothes' appearance and report to family if they need replacing.**

8. BATHING

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

**Assist client to take showers at least weekly. Accommodate preferences. Prepare the bathroom before bringing the client in. Assist with transporting and transfer client on the shower chair. Bathe client according to his expressed preferences and allow him to participate as able. Ensure safety by keeping floors dry and clutter free as much as possible. Dry client and dress before taking to own room after the bath.**

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:

**Caregiver will administer medications daily as prescribed by the Doctor, and will document medication taken.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

**If client refuses to take medications, the caregiver will document and report to the doctor immediately.**

**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:

**Skilled Nurse Services will be coordinated and supervised by the proper agencies, like Home Health, Hospice Delegator.**

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

**Monitor vital signs, Medication set-up, Medication administration, Insulin injections, Wound care, Dressing changes, Catheter care, Ostomy/Colostomy care, Hospice 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

### 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: on call
- Licensed practical nurse, days and times: \_\_\_\_\_
- Certified nursing assistant or long term care workers, days and times: 24 hours per day 7 days/week
- 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:

**This home is open to provide care to clients from all ethnic groups and backgrounds. Language spoken in the home is 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:  
**We accept Medicaid reimbursement for payment. We accept DSHS and private pay residents. The residents, who convert from private pay status to Medicaid, will be not be charged any difference than what the Medicaid program pays. We will accommodate Residents that are approved by Medicaid for payment at the time of admission**

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:

1. Monday, Wednesday & Friday night movies of Residents choice with snacks and beverage.
2. Recreational park visits for able residents.
3. Celebrations of Residents birthdays and holidays.
4. Weather permitting BBQ and picnic gatherings.
5. Mary, Elenor and their church group will sing on certain Saturdays
6. Popcorn
7. Butter bread
8. Bake cookies
9. Decorated cookies
10. Make & toss salad
11. Eat an ice cream corn
12. Read out loud
13. Read the paper aloud
14. Read poem
15. Read classic short stories
16. Read Reader Digest jokes aloud
17. Sing favorite songs
18. Look through catalogues
19. Look at new car brochures
20. Look at life magazine
21. Make a get well or birthday card
22. Write letter to a friend
23. Go for walk
24. Dance
25. Fold towels or clothes
26. Match up basket of socks
27. Sort playing cards by color or suit
28. Play tic-tac-toe
29. Play a card game
30. Make a memory book
31. Play bingo
32. Make puzzle

ADDITIONAL COMMENTS REGARDING ACTIVITIES

**Resident can choose or suggest activities that they would like to participate in.**