



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

RCS/Public Disclosure

HOME / PROVIDER <i>Katimbang House - Karen Katimbang</i>	LICENSE NUMBER <i>751299</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.
Katimbang House accepts clients with behavior problems who are able to handle their own ADL'S, but need help with their meds, transportation, cooking & everyday ^{making} decisions, appts, etc.

2. INITIAL LICENSING DATE: *6/10/97*

3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDE HAS BEEN LICENSED:
985 Mill St. Okanogan, WA from 1/20/96 to 6/10/97

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:

Must be Independent

2. TOILETING

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

Must be Independent

3. WALKING

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

Must be Independent

4. TRANSFERRING

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

Must be Independent

5. POSITIONING

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

Must be Independent

6. PERSONAL HYGIENE

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

Must be Independent

7. DRESSING

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

Must be Independent

8. BATHING

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

Must be Independent

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Katimbang House primarily accepts independent clients, however, if a client declines our RN will assess them to see if we can continue their 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:

Have RN to set up Meeds + fill Insulin Syringes

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Must be able to independently check BS + take Insulin

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:

Have RN services if needed

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

10/29/2014

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Katimbang House has an RN ~~who~~ who sets up the clients med's weekly

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: weekly to refill meds & insulin syringes
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: 7 days a week 24hrs a day
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Provider & staff are all CNA's. There is always a care giver in the home.

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:

Mental health or DD

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Katimbang House will accept all cultural & ethnic backgrounds.

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: _____

OCT 30 2014

ADDITIONAL COMMENTS REGARDING MEDICAID

Katimbang House accepts clients on medicaid with mental health issues who need help navigating the daily issues of life.

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 services:

field trips, picnics, bar-b-ques, restaurant outings

ADDITIONAL COMMENTS REGARDING ACTIVITIES

All activities are optional only. The clients are not required to participate. Also family is wanted to participate in the clients life. We feel the more the family is involved, the healthier the clients mental status is.

Received

OCT 30 2014