

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER The Old Magnolia Adult Family Home/Cherrie De Los Reyes	LICENSE NUMBER 751578
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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.

Being that we are licensed for only 4 residents, (as compared to 6), we pride ourselves in a warm and homely environment. Therefore, creating more of a one on one quality care. We provide exceptional care to the elderlies without compromising their quality of life. Each and every resident are treated with the utmost respect, love and dignity. We also give our residents the sense of feeling at home away from home.

2. INITIAL LICENSING DATE

02/05/2010

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

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

5. OWNERSHIP

- Sole proprietor
- Limited Liability Corporation
- Co-owned by: **Cristina Espiritu**
- 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 provide assistance from total independent to the total dependent. We also provide specialized nutrition for their specific needs. For example, cardiac, vegetarian, diabetic, gluten free, and dysphagia diet (mechanically altered). We also go above and beyond by cueing, reminding, handing over foods or drinks and cutting up foods. To those who may require it, we provide total feeding care. We prepare foods based on their individual personal preference.

2. TOILETING

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

We provide assistance from independent (set up, monitoring and stand by assist) to total dependent, 1 or 2 person assist. We provide toilet booster seat and grab bars for safety. A commode is provided for easy access especially during the night. We provide assistance from set up, cueing, reminding, monitoring to totally doing everything for the resident (peri wash, changing undergarment and applying barrier cream). Skin monitoring is done at all times.

3. WALKING

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

We provide assistance in walking to the total independent and to total dependent. From cueing, reminding, monitoring, walking side by side assistance to the 1 or 2 person assist. We encourage our residents to partake in walking regularly whether by walker, wheelchair or other assistive device.

4. TRANSFERRING

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

We provide assistance with transferring from stand by, monitoring and 1 person to 2 person assist. Hoyer lift and gait belts are provided for safety.

5. POSITIONING

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

All beds are provided with alternating air pressure mattress to prevent bed sores. We provide assistance for positioning from cueing, reminding, monitoring and 1 person to 2 person assist. We encourage independent residents to reposition self often. All residents are repositioned at least every 2 hours all throughout the day.

6. PERSONAL HYGIENE

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

We provide assistance from independent to total dependent. Personal hygiene is performed daily or as needed.

7. DRESSING

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

We make our residents feel independent by encouraging them to choose the clothes they prefer to wear. We provide assistance from independent, set up only, monitoring to total dependent which includes putting on clothes, undergarments, socks and shoes.

8. BATHING

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

Shower is performed according to personal individual preference or as needed. We provide assistance to the total independent (set up, monitoring, reminding and stand by for safety) to total dependent (rinsing, soaping, drying, combing hair, applying lotion, powder and deodorant). Shower bench, grab bars and walk in shower are provided for safety. We provide assistance from 1 person to 2 person assist. Bed bath is provided daily for residents that are physically unable .

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Skin monitoring is performed on a regular basis. We encourage our residents to partake in their personal care by asking them and performing the care based on their individual personal preference.

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:

We provide care to residents with one or more medications. We provide assistance from total independent (set up only, reminding, monitoring) to total dependent (set up, reminding, monitoring, feeding to the resident the medications). All medications are stored in a secured cabinet, we contact the pharmacy to order new prescriptions or refill. We record and report any side effects or changes. We provide assistance on blood glucose monitoring and insulin administering.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

All caregivers are well trained to perform assistance on medications. Resident's vitals are taken daily. We provide monitoring by recording and reporting any changes.

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:

We can arrange skilled nursing services (physical, occupational, speech therapy) and home health nurse. We provide services for hospice care.

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

All caregivers are qualified to be delegated by an approved Nurse Delegator (RN) by DSHS to perform tasks such as wound dressing, blood sugar monitoring, eye drops, catheter care, insulin administering, as needed medications (pain pills, anti anxiety, constipation, etc.) and topical skin medications. A licensed nurse is available for finger and toe nails care upon request or as needed.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

A nurse delegator for our care home comes and visit on a regular basis (every 90 days or as needed). Home health nurse and nurse delegator are available as needed or upon request.

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 provide services from residents that require light care to residents that require heavy care. Our care home can provide either 1 person or 2 person assist.

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: **Home health nurse or nurse delegator available as needed.**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **2 caregivers 24 hours a day**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

All caregivers are qualified, well trained to perform specific care to a specific resident. We can provide a more one on one care by having 2 caregivers 24 hours a day.

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:

Our home welcomes different backgrounds, ethnicity, cultural and religious beliefs.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

English is the primary language in our home. We provide services/care according to our resident's personal preference and belief.

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:

Our home accepts both private and medicaid pay residents.

ADDITIONAL COMMENTS REGARDING MEDICAID

A minimum of 12 months private pay must be confirmed before admission. The quality of care given are of utmost importance to our care home to both medicaid and private pay residents

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:

Range of motion is encouraged daily, jewelry making, story telling, painting, movie night, game nights, bird watching, strolling in the garden, field trips (shopping, eating, library) if the resident is capable and we are also open to suggestions from our residents. Most of our residents enjoy sitting in our front

porch, just simply enjoying the fresh air and the scenery.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

We encourage our residents to participate in daily activities. Our care home activities are based on our resident's personal preferences.

Please Return the completed form electronically to AFHDisclosures@DSHS.WA.GOV

The form may also be returned by mail at:
RCS – Attn: Disclosure of Services
PO Box 45600
Olympia, WA 98504-5600