



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

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| HOME / PROVIDER <b>Caseys Adult Family Home LLC</b> | LICENSE NUMBER <b>751688</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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Received

JAN 25 2017

RCS/Public Disclosure

| About the Home   |  |
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| <b>1. PROVIDERS STATEMENT (OPTIONAL)</b><br>The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home. <b>Our goal is to provide the best care possible to our client based on regulation set forth by DSHS. Our own personal knowledge &amp; compassion for vulnerable adults along with safe, homey &amp; warm environment</b> |  |
| <b>2. INITIAL LICENSING DATE</b>   | <b>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</b><br>5913 NE 112 St. Vancouver, WA 98686<br>5912 NE 112 St. Vancouver, WA 98686 |
| <b>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</b><br><b>Caseys Adult Family Home</b>  |  |
| <b>5. OWNERSHIP</b><br><input type="checkbox"/> Sole proprietor<br><input checked="" type="checkbox"/> Limited Liability Company<br><input type="checkbox"/> Co-owned by:<br><input type="checkbox"/> 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:

Assistance will be provided for client needing help with feeding

2. TOILETING

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

Assistance will be provided for client needing help in toileting

3. WALKING

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

Caregiver will assist & supervise with walking as needed

4. TRANSFERRING

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

Caregiver will assist to transfer as needed, Caseys AFH have EWCLift to aid in transfer

5. POSITIONING

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

Caregiver will reposition client as needed

6. PERSONAL HYGIENE

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

Caregiver will encourage client to perform, but will help client as needed

7. DRESSING

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

Caregiver will give choice of clothing, will help client dress & undress as needed

8. BATHING

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

Caregiver will encourage client to participate but will help client as needed

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Caseys AFH will always ask client to participate if possible.

**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:

Assist & total management, order medications

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Call doctor for refills as needed

### 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:

home health services will provide

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

with delegation caseys provide services such as CBC check, insulin injection, wound care, catheter irrigation, colostomy care

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Caseys provides nursing services in accordance to rules & regulation from DSHS & DOH

### 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: \_\_\_\_\_
- Licensed practical nurse, days and times: \_\_\_\_\_
- Certified nursing assistant or long term care workers, days and times: 24 hours X 7 days
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Caseys employ 2 caregivers during daytime

### 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:

Filipino, English, Russian

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:

ADDITIONAL COMMENTS REGARDING MEDICAID

Caseys APH accept client with private & medicaid funding

**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: One on one, discussion, nail polish party, bingo, party twice a year, card game

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Caseys encourage with activities available

Please Return the completed form electronically to [AFHDisclosures@DSHS.WA.GOV](mailto: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