



Adult Family Home Disclosure of Services Required by RCW 70.128.280

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| HOME / PROVIDER Estera's New Hope AFH, Inc. / Estera D. Dodd | LICENSE NUMBER AH751736 |
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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

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| 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. The home has provided excellent care to the elderly since 1994, licensed for six residents. Live in providers offer care from minimal to full assistance in a warm family environment. For seniors, who can't live alone but prefer to not live in a institutional setting. Location: beautiful, quite, secure neighborhood in Kirkland, WA, just minutes from Evergreen Hospital & Medical Center. Easy accessible from I-405. Peace, Comform, Rest, Well Being, and Redeemed. | |
| 2. INITIAL LICENSING DATE 03/14/2007 | 3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: N/A |
| 4. SAME ADDRESS PREVIOUSLY LICENSED AS: New Hope Adult Family Home, Estera Dodd, Estera's New Hope AFH, Inc. | |
| 5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input checked="" type="checkbox"/> Other: In Corporated | |

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:

Home provides cuing, monitoring to total assistance, total food preparation: Home Cooked Meals. Special diet, soft diet, blended diet, and supplimentals, etc."Ensure"all with Doctors directions, if needed.

2. TOILETING

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

Home provides assistance from cuing, monitoring to total assistance.

3. WALKING

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

Home provides walking assistance from prompting, supervising, to a one or person assist.

4. TRANSFERRING

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

Home provides transfer assistance from cuing and monitoring to a one or two persoon assist.

5. POSITIONING

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

Home provides assistance with positioning from cuing and monitoring to a one or two person assist.

6. PERSONAL HYGIENE

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

Home provides assistance with personal hygiene from cuing and set up to total assistance.

7. DRESSING

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

Home provides assistance with dressing from cuing and set up to total assistance.

8. BATHING

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

Home provides assistance with bathing from cuing and set up to total assistance.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Personal care service is provided by licensed health professional. Baths in a seperate roll-in shower room.

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:

The home medication assistance provided, is any medication with Dr. prescriptons and/or covered by RN, Nurse Delgators delgation to a licensed health professional with a NAR and covered by WAC guildlines.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

The home works with a professional pharmacy monitoring our MARS { med. list}, changes, alerts, daily.

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:

The home provides skilled nursing services through a skilled professional RN, nurse delegator or call 24 hours.

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

The home skilled nursing services are provided by a professional RN, nurse delegator through delegation.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Home: Home Dr. Mobile Dentist, Podiatrist, Hospice, Developmental Disabilities, Alzheimer's/Dementia

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

Home: Mobile hair stylist, Home Dr., Podiatrist, Hospice, and Mobile Dentist.

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: **RN, on as needed basis**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **24/7 on rotating basis**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Home: Caregiving staff, minimal 2 to 3 depends on number of residents 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:

English, Romanian, Spanish, reasonable cultural & religion expressions accepted & All Birthdays party's.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Home celebrates all major-mainstream holidays and many national holidays, will consider and reasonable request by a resident.

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:

Private pay residents that maintain private pay for 24 months, they will be offered a shared room, that's all medicaid will pay for. If the resident desires a private room and is receiving medicaid funding, they will have the opportunity to a pay supplement for the private room. The cost of the supplement is negotiable at the time the resident transitions onto medicaid. The home requests a 90 day notice to the expected transition, so that we may work with DSHS to ensure a smooth transition.

ADDITIONAL COMMENTS REGARDING MEDICAID

DSHS resident will be offered shared room if available or they can negotiate supplement for pri/room.

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:

Holiday celebrations, Birthday parties, Patio & Yard days, Music, Walks, Games, Classic movies, Exercise Programs.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Outings, depending on resident mobility, condition and strength.