

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Cornerstone Community	LICENSE NUMBER 751981
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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.

Cornerstone Community is a nonprofit, community-sponsored and supported, adult family home serving the developmentally disabled population solely. Our goal is to provide a loving, nurturing, and safe home and family environment where residents can thrive and grow and realize their potential. We foster respect, understanding, and patience as we all celebrate each individual's uniqueness and allow for their challenging behaviors. We encourage growth of the body, the mind, and the spirit.

2. INITIAL LICENSING DATE

07/11/2011

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

None

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

N/A

5. OWNERSHIP

- Sole proprietor
- Limited Liability Corporation
- Co-owned by:
- Other: **Non-Profit Corporation**

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:

Will cut up food as needed and provide limited assistance. It is assumed most residents will be able to feed themselves.

2. TOILETING

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

Will provide cueing and assistance with cleaning afterwards. Supervision as needed. It is assumed most residents will be able to toilet themselves.

3. WALKING

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

It is assumed that residents are ambulatory or can use device of their own to get around when admitted. Will provide supervision and limited physical assistance to residents once admitted as needed.

4. TRANSFERRING

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

It is assumed that residents can make their own transfers normally, though some assistance can be offered for short-term situations.

5. POSITIONING

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

It is assumed upon admittance that residents can position themselves.

6. PERSONAL HYGIENE

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

It is assumed that most residents upon admission can take care of their own personal hygiene including bathing / showering, teeth care, shaving, and grooming. Cornerstone will admit up to two of six residents who need extra physical help with showering, brushing teeth, and grooming. Cueing and reminders and training offered to all.

7. DRESSING

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

It is assumed upon admission that residents will be able to dress themselves, though assistance may be offered to help choose appropriate clothing for the weather and occasion. Up to two residents will be admitted that require more physical assistance in getting dressed.

8. BATHING

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

It is assumed most residents upon admission will be able to bath themselves, with minimal help in setting water temp, and giving reminders. Up to two residents will be admitted that require more physical assistance with showering / bathing.

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:

It is assumed that residents upon admission will be able to take their own routine pills with minimal assistance and cueing. Nurse delegation provided for items such as topical applications, eye and ear drops, and similar such medications that may be difficult for the resident to reach or do themselves.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

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:

Nurse on call. Regular skilled nursing not available.

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

Nurse delegation for topical applications, ear and eye drops and other similar needs offered regularly.

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

We are a home that exclusively serves the population with developmental disabilities.

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 as needed**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **6 AM - 11 PM**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Awake staff not provided during night, though staff is available to be woken by residents as needed.

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:

Currently have English-speaking only residents, though we do have Spanish-speaking staff and would be open to someone whose primary language is Spanish.

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 exclusively serve low-income, Medicaid qualified clients with developmental disabilities only.

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:

Daily walks with caregivers and / or volunteers

Game nights and movie nights

Membership in a local health club exercise center just a block from the home

Participation in Upper Valley Connection - a program serving all area special needs individuals with sports, social opportunities, and a yearly week-long theater camp.

Participation in some of the Wenatchee Parks and Recreation events for special needs.

Weekly bowling in the valley's special needs league, The Sunshine Bowling League.

Other local outings to musical, theatrical, community events as desired and available.

Home-sponsored outings for picnics, movies, etc.

Special Olympics participation: currently cross-country skiing in the winter and cycling in the spring.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Our goal is to encourage participation in, and interaction with, the community at large and not just the special needs population. Therefore we encourage participation in church, community groups, etc. and we host events at Cornerstone for the community at large and have many volunteers to come and work with our residents in areas of music, arts, and movement.