



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

HOME / PROVIDER <b>HEAVENLY CARE INC/LARRY &amp; SHARYN RICHMOND</b>	LICENSE NUMBER <b>752144</b>
---	---------------------------------

**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.

### Table of Contents

- [About the Home](#)
- [Personal Care](#)
- [Medication Services](#)
- [Skilled Nursing Services and Nursing Delegation](#)
- [Specialty Care Designations](#)
- [Staffing](#)
- [Cultural or Language Access](#)
- [Medicaid](#)
- [Activities](#)

### 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. <b>Heavenly Care is a Five Star AFH for seniors with high quality services at an affordable cost within a loving family environment in a quality home. Seniors who would like to reside here will find that the underlying reason for our name "Heavenly Care" is that we hold the hope of heaven within us and desire that our care for seniors is a reflection of the love and joy it entails. The best quality with great savings!! A great alternative to nursing/boarding home facilities!</b>	
2. INITIAL LICENSING DATE <b>02/06/2012</b>	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: <b>n/a</b>
4. SAME ADDRESS PREVIOUSLY LICENSED AS: <b>n/a</b>	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input checked="" type="checkbox"/> Other: <b>S Corp</b>	

**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:

**Eating assistance from cuing & monitoring to total assistance**

2. TOILETING

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

**Toilet assistance from cuing & monitoring to total assistance**

3. WALKING

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

**Provide walking assistance from cuing & monitoring to a 1-2 person assist**

4. TRANSFERRING

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

**Provide transfer assistance from cuing & monitoring to a 1-2 person assist (hoyer lift on site)**

5. POSITIONING

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

**Provide assistance w/positioning from cuing & monitoring to a 1-2 person assist**

6. PERSONAL HYGIENE

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

**Provide assistance w/personal hygiene from cuing & set-up to total assistance**

7. DRESSING

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

**Provide assistance w/dressing from cuing & set-up to total assistance**

8. BATHING

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

**Provide assistance w/bathing from cuing & set-up to total assistance**

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

**Staff is experienced in hoier lift transfers and our home is well suited for its use**

**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 medication assistance & medication administration**

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:

**Contract nurse services and are able to perform nurse delegated tasks**

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

**We are willing to perform any nurse delegated task under the rule of the law**

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

**Interaction with our local hospital Home Health Program**

**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: \_\_\_\_\_
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

--

**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 is the main language here at Heavenly Care**

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

**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:

**Our client's interests are considered. Activities are based on what the person can do & what the person enjoys, like crafts, exercise, gardeing, listening to music, various board games, fold towels, range of motion exercises, reading, etc**

ADDITIONAL COMMENTS REGARDING ACTIVITIES

**We also offer (at our convenience) shuttle bus service for doctor visits and outings. Our sixteen passenger bus is fully ADA Compliant. It is able to transport five wheel chairs**