

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Sincere Care AFH,LLC	LICENSE NUMBER 752188
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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. Sincerecare mission's is to provide best care with dignity and honor as our own family .We belive that the best care must include safety , confort , social interaction and acceptanc as member of family.It is in our religion and cultural DNA of Ethiopia to honor and care with dignity for our seniors for more Blessing here and the Heaven.	
2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: n/a
4. SAME ADDRESS PREVIOUSLY LICENSED AS: 14420 88th Ave NE KIRKLAND ,WA 98034	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Co-owned by: <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:

Staff will cook meals, served the clients and assist them as required or needed in a case by case needs.

2. TOILETING

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

We provide direct physical assistance in accessing toilet, setting on the toilet, lifting up and cleaning them as required. Staff will also make sure everything is disinfected and ready to use again after clients is done with toileting

3. WALKING

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

Caregiver will walk with client and help as needed. Daily short walks will be offered to clients.

4. TRANSFERRING

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

Staff will help client to transfer in a safer manner and provider will keep extra care giver if needed as plan in the Negotiated Care plan.

5. POSITIONING

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

Caregiver will make sure client is repositioned at least two hours and look for any sign of bed sores and Report immediately any changes on clients skin.

6. PERSONAL HYGIENE

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

Staff will remind and help clients to do personal hygiene daily and will help them as needed or required by clients.

7. DRESSING

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

Staff will assist with dressing, always give clients choices in clothing and dress as client preferences.

8. BATHING

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

Staff will help clients who need help and will set up for the clients who can shower themselves at least as couple times a week.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Staff will keep fingernails clean and will remind to wash hands as needed.

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:

Staff will keep medication in a lock storage and will give to clients as ordered by doctor & will record any

medication given

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

If client doesn't want to take the medication notify the clients doctor immediately .

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:

Register Nurse on call for delegation and assistance of clients as needed ,

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

Diabetes Insulin, apply ointment, eye drops and anything that client need and can be done by caregiver after being delegated by a registered nurse.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Provider will keep a record for delegated task assigned by a registered nurse

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

Parkinsons, memory loss, diabetic care..

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: **CNA OR HCA..**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Staff will be available at night but only if a client need attention.

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:

SincereCare AFH served cliets with English languge .

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:

If private client , client need to be at least been private for 18-24 months before the transation.

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:

Walking on groups or client to client around the block . Also, playing cards, coloring books, puzzle, watching movie, watching opera.garding small plant,music time, computer usage time..

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Sincere care AFH will work as group but also on one by one setting for the satisfaccion of our clients.

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