



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Peace of Mind AFH	LICENSE NUMBER 752246
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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. Peace of Mind AFH strives to give loving care to those that are unable to care for themselves. Each resident is treated with respect and the realization that their needs are ever changing. If in the event there is significant decline in health, we will strive to continue to care for the resident until passing.	
2. INITIAL LICENSING DATE 04/27/2010	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: 1944 Hetrick, Richland WA99352
4. SAME ADDRESS PREVIOUSLY LICENSED AS: Peace of Mind AFH	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Corporation <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:

All meals and snacks are prepared by the staff at the AFH. The medical needs of the residents with diabetes, strokes, etc are met. Residents that have difficulty feeding themselves are assisted by the staff. Specialized utensils may be needed and used. Those needing pureed or thickened liquids are accommodated. The staff is also able to care for those getting tube feedings.

2. TOILETING

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

The staff toilet residents frequently striving for continence. Briefs are frequently checked and changed. Staff is awake at night to toilet and change residents if soiled. Staff are trained to care for those residents with catheters.

3. WALKING

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

Staff encourage the residents to remain mobile and safe. Exercise class and range of motion is part of the daily routine. Use of walker, cane and gait belt maybe needed and encouraged.

4. TRANSFERRING

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

Basic stand by observance to complete transfer using a hoyer lift or seralift is available. All staff have been trained in all transfer methods keeping both the resident and caregiver safe. A transfer pole maybe used to keep the resident more independent.

5. POSITIONING

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

Positioning is important to maintain intact, healthy skin. Residents are reposition every two hours at night if they are unable to turn/reposition themselves. Special mattresses and pillows maybe used to assist with comfort and skin conditions. All residents have hospital beds that have the potential for both head and foot to be elevated to assist with comfort measures. Lift chairs are also available.

6. PERSONAL HYGIENE

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

All personal hygiene needs are met by the staff. This includes oral care, pericare, nail and hair care to name a few.

7. DRESSING

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

Staff attempt to keep the resident as independent as possible. They will assist as much as needed from assisting with picking out clothing to fully dressing the resident.

8. BATHING

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

All residents are given showers twice a week, more frequently if needed. Bed baths can be given when necessary.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Staff accommodate the resident at whatever level is necessary to keep them as independent as 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:

All staff have had state training for delegation. They will observe the resident take their own medication or assist with the administration. Those residents unable take medication will have the staff administer it. This also includes giving insulin, checking blood sugars, eye drops, patches, inhalation therapy.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Medications are in locked cart or cabinet. All narcotics are accounted for each shift.

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:

Foley and suprapubic catheter care, tube feedings, colostomy care, wound care, para and quadraplegic care

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

Foley and suprapubic catheter care, tube feedings, colostomy care, wound care, all aspects of medication delivery. Oral suctioning. No IM injections or IV's.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Those needing a high level of care are welcomed.

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

All levels of dementia are cared for except those that are exit seeking or physically combative due to concerns with injuring themselves, other residents or the staff.

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: **The home is owned by a ARNP**

Licensed practical nurse, days and times: _____

Certified nursing assistant or long term care workers, days and times: **Caring for residents 24/7**

Awake staff at night

Other: _____

ADDITIONAL COMMENTS REGARDING STAFFING

All staff have state mandated classes, background check and drug screen.

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:

Multiple staff are able to speak both english and spanish.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

All cultures and religions are respected.

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:

A current assessment by the state and the ability to safely care for the resident

ADDITIONAL COMMENTS REGARDING MEDICAID

If admitted as a private pay, the resident can remain at the AFH as state pay if desired.

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:

Activities, exercise, music, movies, games, BBQ, outdoor parties

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Staff encourage all residents to participate but respect those that do not wish to do so