



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

Received

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HOME / PROVIDER Home Again AFH/ Damaris Ramirez	LICENSE NUMBER 752316
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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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<b>About the Home</b>	
<b>1. PROVIDERS STATEMENT (OPTIONAL)</b> The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home. Our mission is putting our residents first. They are giving love, respect, a voice constant attention and stimulation. Home Again is designed to provide the highest quality of care all while receiving affection, reassurance and above all love. Please visit at <a href="http://www.homeagainafh.com">www.homeagainafh.com</a>	
<b>2. INITIAL LICENSING DATE</b> 10/16/2012	<b>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</b> 1319 North 192nd St Shoreline, WA, 98133
<b>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</b> Home Again AFH	
<b>5. OWNERSHIP</b> <input checked="" type="checkbox"/> Sole proprietor <input 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:

Monitoring, feeding tube, puree diet, mechanical diet, total assistance

#### 2. TOILETING

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

Monitoring, cuing, to total assistance

#### 3. WALKING

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

Wheelchair, guiding walker, one person assist to total assistance

#### 4. TRANSFERRING

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

Gait belt, hoyer lift, total assistance

#### 5. POSITIONING

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

Every two hours, monitor, total assistance

#### 6. PERSONAL HYGIENE

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

Set up, cuing to total assistance

#### 7. DRESSING

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

Set up, cuing to total assistance

#### 8. BATHING

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

Set up, cuing to total assistance

#### 9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

All personal care and activities of daily living is provided

### 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:

Self administer, Insulin Injection, medication administration all delegated by a Nurse Delegator

#### ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Nurse Delegator every 90 days

**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: We accept all in home health companies for PT, OT, Speech, Hospice and Nursing care. Podiatric visit every 90 days. ARNP visits the home every 30 days.

The home has the ability to provide the following skilled nursing services by delegation: Diabetes, insulin administration tube feeding, colostomy, ostomy, oxygen care, catheter care, nebulizer use, inhalers, hospice care.

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

**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: 24 hours a day
- Awake staff at night
- Other: CNA 24 hours a day

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:  
We accept all genders, race, religion, and disabilities.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

We speak English and Spanish, we celebrate most of holidays.

### 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 for a year

ADDITIONAL COMMENTS REGARDING MEDICAID

Contact owner for details, if resident is on medicaid, or conversion to Medicaid is sooner than 1 year

### 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:

Live Music with a piano twice a month, live music with guitar twice a month, Holidays celebration

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Activities: Birthdays celebration  
Manicures and foot massage, hair cuts monthly  
Exercises customize for each resident  
Variety of games per resident abilities/ wishes  
Art and craft  
Bible studies  
Mornings devotionals inspirational  
Transportation .