



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

HOME / PROVIDER <b>REGINA COEL AFH / Gina Celestial</b>	LICENSE NUMBER <b>752 396</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>TO PROVIDE HIGH QUALITY FOR YOUR LOVED ONE IN A COMFORTABLE, LOVING AND COMPASSIONATE ENVIRONMENT AND TO BRING A SENSE OF FAMILY AND HOME THRU WARM AND TENDER LOVING CARE FROM ALL OUR CAREGIVER.</b>	
2. INITIAL LICENSING DATE <b>11-09-07</b>	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: <b>NONE</b>
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	

Received

OCT 08 2015

Page 1 of 4

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:

WE PROVIDE EATING ASSISTANCE FROM CUEING AND MONITORING TO TOTAL ASSISTANCE

2. TOILETING

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

WE PROVIDE TOILETING ASSISTANCE FROM CUEING AND MONITORING TO TOTAL ASSISTANCE

3. WALKING

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

WE PROVIDE ASSISTANCE FROM CUEING AND MONITORING TO ONE OR 2 PERSON ASSIST

4. TRANSFERRING

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

WE PROVIDE TRANSFER ASSISTANCE FROM CUEING AND MONITORING TO A ONE OR 2 PERSON ASSIST

5. POSITIONING

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

WE PROVIDE ASSISTANCE WITH POSITIONING FROM CUEING + MONITORING TO 1 OR 2 PERSON ASSIST

6. PERSONAL HYGIENE

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

WE PROVIDE ASSISTANCE WITH PERSONAL HYGIENE FROM CUEING + SET UP TO TOTAL ASSISTANCE

7. DRESSING

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

WE PROVIDE ASSISTANCE WITH DRESSING FROM CUEING + SET UP TO TOTAL ASSISTANCE.

8. BATHING

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

WE HAVE PROVIDE ASSISTANCE WITH BATHING FROM CUEING & SET UP TO TOTAL ASSISTANCE,

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

WE HAVE SPECIFIC EQUIPMENT IN SHOWER, HAND HELP SHOWER, BATH CHAIR, GRAB BARS AND PRIVACY CURTAINS

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 FROM CUEING & SET UP. BE ADMINISTERED BY A DELEGATED STAFF THROUGH RN DELEGATION

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

WE CONTRACT WITH A NURSE (RN) FOR DELEGATION TO PROVIDE SKILLED NURSING SERVICES OR DELEGATION.

**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 PROVIDE SKILLED NURSING SERVICE BY A CONTRACTED RN

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

WE PROVIDE MEDICATION ASSISTANCE BY RN DELEGATION

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

WE PROVIDE HOSPICE CARE THROUGH HOME HEALTH WITH SUPERVISION OF RN

**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: "ONLY AS NEEDED"
- Licensed practical nurse, days and times: \_\_\_\_\_
- Certified nursing assistant or long term care workers, days and times: EVERY DAY (24 HRS.)
- 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) WE PROVIDE MEALS THAT ACCOMMODATE CULTURAL & ETHNIC BACKGROUND

The home is particularly focused on residents with the following background and/or languages:

THE HOME IS FOCUSED ON AMERICAN BACKGROUND WITH ENGLISH LANGUAGE.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

THE HOME HAS FILIPINO (TAGALOG) SPEAKING BESIDES ENGLISH LANGUAGE.

<b>Medicaid</b>	
<p>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)</p>	
<p><input type="checkbox"/> The home is a private pay facility and does not accept Medicaid payments.</p>	
<p><input checked="" type="checkbox"/> The home will accept Medicaid payments under the following conditions:  <i>ACCEPTS MEDICAID AFTER 2 YEARS OF PRIVATE.</i></p>	
<p>ADDITIONAL COMMENTS REGARDING MEDICAID <i>ACCEPTS PRIVATE AND MEDICAID RESIDENTS.</i></p>	
<p><i>ACCEPT MEDICAID CLIENT COMPATIBLE WITH OTHER RESIDENTS WITH NIGHT ASSESSMENT AND RATE</i></p>	
<b>Activities</b>	
<p>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).</p>	
<p>The home provides the following: <i>FACILITY PROVIDES GROUP AND INDIVIDUAL ACTIVITIES INCLUDING DAILY EXERCISE, HOME MOVIES, PUZZLES, READING MAGAZINES, CROQUET, BINGO EVERY WEDNESDAY.</i></p>	
<p>ADDITIONAL COMMENTS REGARDING ACTIVITIES  <i>RESIDENTS CAN ALSO JOIN COMMUNITY GROUP IF ABLE AND HAS THE RIGHT TO REFUSE.</i></p>	