

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER NINA'S HOME CARE/ Semira Bahtijaragic	LICENSE NUMBER 752459
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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. Nina's Home Care provides a quality of life that is safe, enjoyable and carin to all of our residents. Our goal is to meet the physical, social, emotional and spiritual needs of all resident of Nina's Home Care. Nina's Home Care develops individualized plans of care to meet every residen's needs based on their health, interests and safety.	
2. INITIAL LICENSING DATE 07/18/2013	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: N/A
4. SAME ADDRESS PREVIOUSLY LICENSED AS: N/A	
5. OWNERSHIP <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:

Nina's Home Care meets the eating physical skills of residents where is included hand feeding and intake nourishments by tube

2. TOILETING

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

bedside commode, bed pan, urinal, transfers on/off toilet, cleaning and changing incontinence supply

3. WALKING

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

Total walking assistance

4. TRANSFERRING

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

One caregiver total transferring (if two caregivers are not required)

5. POSITIONING

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

Total assistance with positioning with weight limitation of 160 pounds maximum

6. PERSONAL HYGIENE

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

Total personal hygiene assistance provided

7. DRESSING

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

Total dressing assistance

8. BATHING

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

Total bathing assistance

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

none

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:

Total medication assistance with nurse delegation

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:

RN on call 24/7 and contract with a nurse to provide nurse delegation

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

oral and topic medication, inhalers, eye drops, ointments, allergy kits, sprays, meds organizers

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

none

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

DIABETES -INSULIN DEPENDENT SPECIALTY TRAINING

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: **ON CALL 24/7**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **24/7**
- 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:

no limits regarding backgrounds but NHC services and communication are based on English, Russian, German and Serbo-Croatian languages

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:

DSHS Pay rate needs to match resident health condition and based on that required home care services.

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:

Nina's Home Care individualize activities by residents interest, physical, mental,spiritual needs and abilities, where is a safety of residents prerogative.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

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