



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Mercer Islands Premier Adult Family Home LLC dba The Pearly Jones	LICENSE NUMBER 752484
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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)	
<p>The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home. MISSION STATEMENT FROM OWNER, ANNA MOODY: in 2002, my mother Pearl, lived with me, my husband, and young children. When her care needs exceeded what i could provide, i had find alternative living arrangements for her. There was a lot of guilt in this decision and concern for her well-being. I know personally how an adult child feels, when called to the task of selecting a care facility for their parent(s). Its not an easy choice and one that is full of conflicting emotions.</p> <p>The goal of The Pearly Jones Homes’ staff and owners is to give you peace of mind about the safety, care and well-being of your loved one. When you walk out the door, after a visit, you should feel completely satisfied that we are giving them the very best care possible and that you have made a good, sound choice in placing your loved one(s) with The Pearly Jones Homes.</p> <p>We are pleased and honored to have given this gift of care to dozens of families over the years. We welcome you to become a part of the Pearly community.</p>	
2. INITIAL LICENSING DATE 08/23/13	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: 2830 26th Ave W Seattle WA 98199; 2833 26th Ave W Seattle WA 98199
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Corporation <input checked="" type="checkbox"/> Co-owned by: Anna Moody , Steve Moody, Kay Seelig, and Russ Seelig <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: Three nutritious meals are served daily along with snacks and 'on demand' food anytime 24/7. Personal preferences and dietary accommodations are fully provided for. Breakfast is served when the resident wakes. Lunch and dinner are at set times (12pm&5pm) Snacks and drinks offered throughout the day. We fully accommodate residents who require meals to be cut up, pureed foods, and cultural/ religious preferences. We are unable to provide a kosher meal. We are fully accommodating if a resident needs special utensils or needs assistance with eating. If a resident does not care for the meal being served we will provide an alternative meal to that resident.

2. TOILETING

If needed, the home may provide assistance with toileting as follows: Residents are frequently toileted. If they cannot reach the bathroom independently, they are escorted by a caregiver. If a resident cannot easily reach a bathroom, they are assisted to a commode in their room. If a resident is unable to get out of bed, their brief is changed regularly. Following toileting the staff uses hygienic measure to prevent urinary tract infections. When appropriate, a bedpan is use. In all toileting procedures the resident has complete privacy. If a resident is incontinent, the caregiver will assist with changing and cleaning on a regular basis. These procedures are in effect 24hrs a day, ad there is an awake caregiver at night, tending to all toileting needs.

3. WALKING

If needed, the home may provide assistance with walking as follows: Caregivers provide standby and hands on assistance for residents who use a: cane; walker; crutches; wheelchair

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: Caregivers assist resident with transfers if needed using the following: transfer belt, gait belt, hoyer lift, slide board

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: Resident who are bedridden are turned every several hours 24/7. Resident who stay in bed for extended periods of time are also turned frequently. Those who use a wheelchair are transferred to a chair every few hours.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: Nails; skin; hair; teeth & mouth; wounds; devices such as tooth brushes or razors; hearing aids. Showers or bed baths are given at least twice a week or more frequently if needed. Ears are checked regularly and cleaned if necessary. Hair is curled for women as needed. Men are shaved daily. Nail polish is applied to female residents if desired. Lotion is applied to resident following shower and as needed. Oral care is either independently done or by a caregiver at least once daily. Finger nails are trimmed weekly and cleaned as needed. Wound care is delegated by an RN and followed by the caregiver. Podiatrist comes every 2 months. Face and hands are washed daily.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: The resident is allowed to choose their own clothing. If they cannot do so, the caregiver chooses the clothing of the day. Dressing occurs in the residents room and in complete privacy. The resident is encouraged to do as much for self as possible. The caregiver puts on Ted Hose (if needed). The following will also be worn daily if a female resident so desires: necklace; earrings; brooch; watch; makeup.

8. BATHING

If needed, the home may provide assistance with bathing as follows: Three types of bathing are available: Complete bed bath; partial bed bath and shower. Frequency of bathing is a minimum of twice weekly and after any 'accident'. The type of bath the resident receives will depend on the needs of the resident. The resident is put on the shower chair and rolled into the shower. Hair is shampooed and conditioned. All body parts washed with 'sensitive skin' body wash. Moisturizing lotion is put on the residents body following the shower.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

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: Medications are ordered from a pharmacy that 'bubble packs' them at no extra cost All medications are dispensed by caregivers who are CNA or NAR licensed before 2012. These caregivers have taken the nurse delegation course and some have focus on diabetes. Our nurse delegates tasks such as crushing medications and insulin injections. All narcotics are double locked and counted every shift change. Medications are dispensed at the appropriate time, quantity, and by a qualified caregiver. We have a medication disposal policy that is followed when a medication is discontinued or expired.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Residents representative has two choices of medication disposal: Choice 1 Medication is given to the Residents Rep. A Disposition of medications form is completed and placed in residents chart. Choice 2 We will A. Return all unopened medications to the pharmacy and disposed of all open medications as follows: Removes the medications from packages, remove all personal information, mix med with kitty litter or coffee grounds and place in garbage. Shred package complete the disposition of medication form and place in residents chart.

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: Administration of medications, oral, topical creams, powders, ointments, liquids, inhaled medications, drops, suppositories, enemas, patches. Suctioning. In and out catheters using clean technique/ bladder irrigation/ supra pubic irrigations. Tube feeding, colostomy care established and healed condition. Blood glucose monitoring/INR. Simple non-sterile dressing wound care. Insulin injections.

The home has the ability to provide the following skilled nursing services by delegation: Administration of medications, oral, topical creams, powders, ointments, liquids, inhaled medications, drops, suppositories, enemas, patches. Suctioning. In and out catheters using clean technique/ bladder irrigation/ supra pubic irrigations. Tube feedings, colostomy care established and healed condition. Blood glucose monitoring/INR. Simple non-sterile dressing wound care. Insulin injections.

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: _____ On call- Visits weekly
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: 6am-2pm; 2pm-10pm; 10pm-6am
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Additional caregiver on duty from: 8:30am-12:30pm and 4:00pm-8:00pm

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:
English speaking - All backgrounds

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:

ADDITIONAL COMMENTS REGARDING MEDICAID

There are no provisions to convert a resident to Medicaid if and when the resident becomes eligible.

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:

Most activities are individual rather than group and range from physical to mental.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Outings with facility shuttle bus (wheelchair ready); birthday parties; sports event parties; annual luau; annual Christmas party with Santa.