

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <p style="text-align: center;">Home Care Place AFH / Dencio A. Diego</p>	LICENSE NUMBER <p style="text-align: center;">752595</p>
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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	
<p>1. PROVIDERS STATEMENT (OPTIONAL)</p> <p>The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home.</p> <p>Dedicated to improving the general health and well-being of each residents regardless of who they are. Home Care Place emphasizes the importance of treating disabilities as our own; providing them with the love and respect that only a family will do.</p>	
<p>2. INITIAL LICENSING DATE</p> <p style="text-align: center;">03/13/2014</p>	<p>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</p> <p style="text-align: center;">10437 19th Ave. SW. Seattle, WA 98146</p>
<p>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</p> <p style="text-align: center;">N/A</p>	
<p>5. OWNERSHIP</p> <p><input checked="" type="checkbox"/> Sole proprietor</p> <p><input type="checkbox"/> Limited Liability Corporation</p> <p><input type="checkbox"/> Co-owned by:</p> <p><input type="checkbox"/> Other:</p>	
Personal Care	
<p>“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)</p>	
<p>1. EATING</p>	

<p>If needed, the home may provide assistance with eating as follows: We provide assistance such as cueing, monitoring, and total assistance with feeding residents who are unable to feed themselves.</p>
<p>2. TOILETING</p> <p>If needed, the home may provide assistance with toileting as follows: We provide assistance for the use of the toilet room, commode, bedpan, or urinal. This is including cueing, monitoring, transferring on/off toilet, cleaning (peri-care), changing incontinence pad, and managing ostomy or catheters.</p>
<p>3. WALKING</p> <p>If needed, the home may provide assistance with walking as follows: We provide assistance with walking indoors and outdoor area with cues and monitoring movements. Making sure to always assist those who use assistive devices such as canes, walkers, or wheelchairs.</p>
<p>4. TRANSFERRING</p> <p>If needed, the home may provide assistance with transferring as follows: Transferring assistance ranges from cueing, monitoring, and to a one person assist. Assistance includes moving between surfaces, to/from bed, chair, wheelchair, and standing position. We are also trained to use stand and hoist lift.</p>
<p>5. POSITIONING</p> <p>If needed, the home may provide assistance with positioning as follows: Positioning assistance ranges from cueing, monitoring, and to a one person assist. Assistance includes positioning on side while in bed, positioning while in the wheelchair, and bed mobility from lying position.</p>
<p>6. PERSONAL HYGIENE</p> <p>If needed, the home may provide assistance with personal hygiene as follows: Personal Hygiene assistance ranges from cueing, monitoring, and to total assistance. Assistance includes showers/complete bed bath, shaving, brushing teeth, combing hair, denture care, peri-care, and caring for nails.</p>
<p>7. DRESSING</p> <p>If needed, the home may provide assistance with dressing as follows: Dressing assistance ranges from cueing, monitoring, and to total assistance. Assistance includes helping dress residents with affected right arm with their choice of clothing and organizing clothes to provide positive flow.</p>
<p>8. BATHING</p> <p>If needed, the home may provide assistance with bathing as follows: Bathing assistance ranges from cueing, monitoring, and to total assistance. Assistance includes providing showers in shower tub and providing bed bath.</p>
<p>9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE</p> <p>Home Care Place have two full bathrooms with roll-in shower for convenience and safety.</p>
<p>Medication Services</p>
<p>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)</p>
<p>The type and amount of medication assistance provided by the home is: Medication assistance ranges from cueing, monitoring, and set up to total assistance. I have a current and in good standing credentials for nurse delegation. Provided the task is delegable, I can administer medication.</p>
<p>ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES</p>
<p>Skilled Nursing Services and Nurse Delegation</p>
<p>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)</p>
<p>The home provides the following skilled nursing services: If nursing care is needed, I will coordinate with a licensed nurse in the state of Washington to provide nursing care and services.</p>
<p>The home has the ability to provide the following skilled nursing services by delegation: I am a Registered Nursing Assistant with the DOH and have completed nurse delegation training. Some examples of tasks include: administration of nose, ear, eye drops and ointments, catheter care, or monitoring blood glucose levels.</p>

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: Only as needed.
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: 24-hour staffing coverage.
- 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:
We respect each and every individual's culture, ethnic backgrounds, and religion. We must always accommodate for their needs and preferences. We provide specialized diets, cultural/religious events at home, and communication boards.

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:
Home Care Place accepts Medicaid as a payment source. I also accept private pay who no longer have the ability to pay privately and later become eligible to the Medicaid program as their funding source.

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: Home Care Place strongly encourages residents to be as active as possible. Including: Gardening, stretching, grocery shopping, listening to music, movie nights, birthday celebrations, current news discussion, walking around the vicinity of the house, and visiting different parks around seattle.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

For residents who are interested in other activities, King County Parks and Recreation offers activities all year round. It is very important to note that their activities have a fee, which are held accountable under the resident's expenses.

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