

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER AMAZING CARE Adult Family Home/ Emma Kinyua	LICENSE NUMBER 752610
---	---------------------------------

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	
<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>Our goal is to give our residents quality medical care by our licensed nursing staff while providing a home like invironment. Our home is cozy and friendly and the Provider and staffs one mission is to help you or your loved ones have the best quality of life we can help them obtain.</p>	
<p>2. INITIAL LICENSING DATE</p> <p>04/01/2014</p>	<p>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</p> <p>32318 29th Ave SW, Federal Way, WA, 98023</p>
<p>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</p>	
<p>5. OWNERSHIP</p> <p><input type="checkbox"/> Sole proprietor</p> <p><input checked="" type="checkbox"/> Limited Liability Corporation</p> <p><input type="checkbox"/> Co-owned by:</p> <p><input type="checkbox"/> Other:</p>	

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:

Meals will be provided on the residents schedule to the best of our ability, cultural as well as medical issues will be addressed in special menu's done for each individuals choices or needs. Snacks will be provided as well. We always strive to meet the needs of each resident in our Adult Family Home.

2. TOILETING

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

Catheter care is provided and catheter change is done by Home Health Nurse.

3. WALKING

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

Hands on support all the way to a Hoyer lift will be accepted at our AFH. Clients will not need to relocate due to decreased mental or physical capabilities.

4. TRANSFERRING

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

As above we will use a Hoyer if needed for lifting, all staff are well trained to use gait belts and pivot transfers.

5. POSITIONING

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

All residents that need assistance with positioning will be helped as specified by doctors orders, assessment and care plan, and as needed for comfort.

6. PERSONAL HYGIENE

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

Amazing Care AFH will provide assistance with dental hygiene, personal hygiene, hygiene issues related to incontinent care.

7. DRESSING

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

Total care is available for dressing needs. If you or your loved ones needs total dressing we are able to do that for you as well

8. BATHING

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

Roll-in shower is available, and if for any reason you become bed bound due to illness, or advanced medical problems we can attend to you bathing or shower needs

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:

Medication assistance is based on the resident's needs as outlined in the assessment. Reminders, Self-administration with assistance to total assist is provided through Nurse Delegation per WAC 388-76-10430.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Medications are ordered, documented and verified by the Physician prior to administration

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:

Catheter Changes, Blood Sugar Monitoring and Care, Treatment care, Eye Care, we have staff than can be delegated to the needs of your family or we can make arrangements for visiting nursing services

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

We will have staff delegated for all of the above except the catheter changes if needed. For anything that requires a nurse, a visting nurse can be obtained and is usually covered by your insurance.

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

Our home is open and the residents can see us easily and find us easily, we are well suited for the above 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: **A caregiver/ long term care worker will be available in the AFH 24/7**
- Awake staff at night

Other: **Staff or services will be provided such as in house Physicians, Beauticians, Podiatry, etc, those arrangements will be made when your needs are identified.**

ADDITIONAL COMMENTS REGARDING STAFFING

Staffing will be covered with 2 persons when the needs of the residents exceed what 1 staff can do well.

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

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

If for any reason we have someone with limited language due to a different culture we will make sure that that family or legal representative is available for all Care Plan meetings, and will be available to speak on their behalf on a regular basis and that the resident looking to come into our home is able to speak at least basic English, more detailed conversations will be handled with an intrepeter to make sure all of their wishes and rights are observed and understood.

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:

No conditions, All forms of payments are welcome at our AFH

ADDITIONAL COMMENTS REGARDING MEDICAID

Our AFH will work in close connection with DSHS Assessment Nurses and Case Managers.

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:

Games, walks and outdoor gatherings such as picknics and gardening for those who are able. We provide 1:1 visits for reading, writing letters, music, TV, Basic Cable TV, We like to recognize each Residents Birthday and encourage families to participate in those events as well. We are always open to suggestions and cultural games or life hobbies.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Some hobbies may want to be observed such as rock polishing, paint by number, beading, Knitting, Crocheting. Some craft items are provided for by the AFH , The ones in this paragraph are samples of the type of hobbie that the family or the patient will need to assist in the cost of, or bring a project they are working on with them.