



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

HOME / PROVIDER <i>MERLY PICCOLOMINI</i> <i>THREE ANGELS ADULT FAMILY HOME, LLC</i>	LICENSE NUMBER <i>752762</i>
--	---------------------------------

**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	
<b>1. PROVIDERS STATEMENT (OPTIONAL)</b> The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home.  <div style="text-align: center; font-style: italic; font-size: 1.2em;">SEE ATTACHMENT.</div>	
<b>2. INITIAL LICENSING DATE</b> <i>10-17-2014</i>	<b>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</b> <i>7032 STONE ST. SE, LACEY, WA 98513</i>
<b>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</b> <i>7032 STONE ST. SE, LACEY, WA 98513</i>	
<b>5. OWNERSHIP</b> <input type="checkbox"/> Sole proprietor <input checked="" 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:

*PLEASE SEE ATTACHMENT*

2. TOILETING

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

*PLEASE SEE ATTACHMENT*

3. WALKING

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

*PLEASE SEE ATTACHMENT*

4. TRANSFERRING

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

*PLEASE SEE ATTACHMENT*

5. POSITIONING

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

*PLEASE SEE ATTACHMENT*

6. PERSONAL HYGIENE

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

*PLEASE SEE ATTACHMENT*

7. DRESSING

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

*PLEASE SEE ATTACHMENT*

8. BATHING

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

*PLEASE SEE ATTACHMENT*

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

*PLEASE SEE ATTACHMENT*

**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:

*PLEASE SEE ATTACHMENT*

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

*PLEASE SEE ATTACHMENT*

## **Three Angels Adult Family Home, LLC Disclosure of Services (Attachment)**

### **About the Home**

Our values are simple, Three Angels Adult Family Home strives to offer a high quality of care, an excellent and focused care-giving and a cost effective home care services to individuals and families of Washington State. Three Angels Adult Family Home offers stability, protection, order, worry and anxiety-free environment to client A home that focuses on the enhancement of the quality of life for clients, promote their independence and maintain their highest practicable level of functioning.

Our values and distinct attributes come from our upbringing and play a major role in the heart of our Adult Family Home. At a young age, we are taught to love, respect and care for our parents and elderly. Our strengths and core competencies are our love and dedication to take care of our seniors and vulnerable citizens as we have treated them as our family.

Our goals and objectives are to promote an unsurpassed care-giving and to employ competent, caring and well-trained individuals who are responsive to the needs of our clients/patients, their families and communities we serve.

Our philosophy is to provide the best care without prejudice and to render an excellent one-on-one care to our clients/patients were everyone feels like it is "Home Sweet Home".

### **Personal Care**

#### **Eating**

- AFH provides a balance, attractive, and nutritious meal at a proper temperature. Upon request, provider is willing to customized meal planning for each individual resident or as prescribed by a physician (such as regular, diabetic, puree, swallowing precaution and soft diet) or as requested by family members and legal representative.
- We provides three meals and snacks in between however, snacks are available 24-hours a day.
- AFH provides oral feeding and assistance with meal preparation to clients that are physically handicapped and total assist patient.
- AFH provide small meals at frequent intervals and offer fluids at regular intervals to stimulate client's appetite.

- AFH provides blood glucose monitoring before and after meal for clients with diabetes or as prescribed by a physician.
- AFH promotes mealtime as a social event, special occasion such as birthdays are welcome in the home.
- AFH provides relaxed-settings that allow insight into a client's cultural orientation, family patterns and traditions.

### **Toileting**

- AFH provides assistance to the bathroom for weak and incapable clients and a caregiver remains in attendance if a client is at risk of falling.
- AFH provides handrail, grab bars, swing-up bars and call bell within reach in our bathroom for client's safety.
- AFH provides a bedside commode for clients who can get out of bed but are unable to use the bathroom toilet and one-person to two-person assist will be provided.
- For male or female clients that are not able to get up AFH provides urinals or bedpan, respectively.
- AFH provides assistance to client with bowel, urinary incontinence and indwelling urinary catheter.
- AFH provides medical equipment such as Hoyer lift for client with total assist. No employees/providers are to lift any client from wheelchair to toilet.

### **Walking**

- AFH provides one-person to two-person assist with the use of gait belt and medical equipment for client that are able to stand and walk or with weak stamina, respectively with medical equipment on stand-by.
- AFH provides adaptive equipment to assist with activities of daily living such as cane, walkers, Hoyer lift and sit-to-stand.
- AFH employees/provider provides walking assistance outdoor weather-permitting.
- AFH provides passive range-of-motion exercises for clients that are total assist/dependent.

### **Transferring**

- AFH provides transfer assistance from one-person to two-person assist with the use of Hoyer lift or sit-to-stand.
- AFH provides a hospital bed without side-rails for safety of clients and caregivers while transferring.

### **Positioning**

- AFH provides assistance with positioning from one-person to two-person assist with the use of medical equipment.

- AFH provides adjustable bed, trapeze bar, mattresses and pillows to promote correct alignment.
- For mobility impaired clients, AFH provides assistance with position change of at least every two hours (bed to chair or turning) or as prescribed by a physician, nurse or physical therapist.

### **Personal Hygiene**

- AFH provides assistance with personal hygiene with respect to client's culture, spiritual practices, and personal preferences and Health State.
- AFH provides assessment and monitoring of client's hygiene practices such as bathing habits, sensory, cognitive and mobility impairment.
- AFH provides personal hygiene and set up for clients who are total assist.
- AFH assess, monitor and encourage clients to conduct their personal hygiene if they are able and capable.
- Upon request, resident may work/suggest to AFH their scheduled hygienic care and AFH is willing to provide personal hygiene anytime of the day.

### **Dressing**

- AFH provides assistance with dressing from cuing and set-up to total assistance.
- AFH assess, monitor and encourage clients to dress themselves if they are able and capable.

### **Bathing**

- AFH provides assistance with bathing using sliding shower chair, shower wheelchair and Hoyer lift. Grab bars are installed in the shower stalls.
- AFH provides shower to clients 2 to 3 times a week and also provides daily bed bath for clients that are not able or do not want to shower.
- Upon request clients can customized their bathing preferences and AFH will gladly welcome their suggestions.
- Client's with unimpaired mobility is/are encourage to bathe themselves and are provided with call bell or assistance if they summons for help.
- AFH provides one-person to two-person assist with bathing on clients that are total assist.

### **Additional Comments**

AFH provides basic personal hygiene, bathing and toilet needs. Specialty care needs in this area are provided by clients/legal representative such as specialty shampoo, toothpaste and soap to say the least.

### **Medication Services**

- Clients are assessed and monitor if they are able or not able to administer their own medication.

- Medication assistance consent form is signed by client or legal representative if they are not capable and in need of assistance with their medication.
- AFH provides all types of medication and assistance to total assist client or as prescribed by the physician.
- Five Rights of medication administration are in place in the home.
- AFH employees/providers are delegated or will be delegated with each individual client's medications.
- Consent to photograph is signed by client or legal representative for proper identification before administering medications. Medication administration record is proved for each client.

**Additional Comments**

Only prescribed medications are given to the resident. Over-the-counter medication and supplement needs doctor's order. Insulin and narcotics are stored in a locked box.

**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:

*A LICENSED NURSE IN THE STATE OF WA. MAYBE COORDINATED IF NEEDED.*

The home has the ability to provide the following skilled nursing services by delegation: *CATHETER CARE,*

*INSULIN ADMINISTRATION, PRESSURE ULCER CARE, WOUND CARE/MANAGEMENT, TPN*

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION *DSHS NURSE DELEGATOR ARE PROVIDED FOR MEDICAID CLIENTS. A NURSE DELEGATOR FOR PRIVATE PAY CLIENT IS PROVIDED THROUGH THE AFH.*

**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

*MANAGER SPECIALTY TRAINING FOR MENTAL HEALTH AND DEMENTIA.*

**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: \_\_\_\_\_
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING - *CNA OR LONG TERM CARE WORKERS WILL BE HIRED ONCE THE AFH IS FULLY OCCUPIED. THE OFFICE MANAGER OF THE ADULT HOME IS THE ONLY AWAKE STAFF.*

**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:

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS - *THERE IS NO PREFERENCES IN ANY RESIDENTS BACKGROUND AND LANGUAGES. ALL LANGUAGES, CULTURAL AND SOCIOECONOMIC BACKGROUNDS ARE WELCOME.*

**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

*AFH ACCEPTS MEDICAID AND PRIVATE PAY CLIENTS.*

**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: *PLAYING CARD GAMES, BOARD GAMES SUCH AS SCRABBLE, BINGO, WATCHING MOVIES OR TV SHOWS. WALK TO THE PARK OR MALL. READING BOOKS, PLAYING TRIVIA GAMES AND CHAIR AEROBICS.*

ADDITIONAL COMMENTS REGARDING ACTIVITIES *UPON REQUEST, RESIDENT MAY CUSTOMIZED THEIR ACTIVITY PLAN AND AFH PROVIDERS WILL GLADLY ACCEPT ANY SUGGESTIONS. GROUP OUTINGS ARE PROVIDED BY THE AFH.*