

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER A&M Homecare, LLC	LICENSE NUMBER 752821
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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.

- Provide personalized care for people (elder as well as young) that require in-home care that surpasses expectations.

- Maintain the health, independence, comfort, dignity, and quality of life that our residents deserve.

2. INITIAL LICENSING DATE

01/26/2015

3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:

N/A

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

N/A

5. OWNERSHIP

- Sole proprietor
- Limited Liability Corporation
- Co-owned by:
- 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:

- **Notify resident when meals are prepared or bring food to resident.**
- **Offer resident between meal snacks.**
- **Help resident sit down and push in chair for resident.**
- **Cut resident food (sandwiches) to manageable portions/ size.**
- **Feed resident as needed.**

2. TOILETING

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

- **Assist resident with clothing adjustment after toileting.**
- **Provide perineal care after toileting, as needed.**
- **Transfer resident on/off toilet, as needed.**
- **Encourage/ remind resident to toilet regularly.**

3. WALKING

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

- **Assist resident to stand up and maintain contact with resident until steady.**
- **Assist resident walk and talk resident through.**
- **Ensure resident is able to walk and walk with resident, as needed.**

4. TRANSFERRING

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

- **Assist resident to sit up in bed, as needed.**
- **Maintain contact with resident until steady and talk resident through each transfer.**
- **Monitor pressure points.**
- **Reposition resident at resident’s request or as needed.**
- **Assist resident with wheelchair transfers.**
- **Ensure resident does not fall out of bed or wheelchair.**

5. POSITIONING

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

- **Assist resident to rollover.**
- **Assist resident with elevating legs/ feet into bed.**
- **Reposition resident at resident’s request or as needed.**
- **Ensure resident does not fall out of bed or wheelchair.**

6. PERSONAL HYGIENE

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

- **Assist resident with brushing/ combing hair, clean eye glasses, put on eye glasses, as needed.**

- **Setup personal hygiene tasks, as needed.**
- **Remind/ help resident to wash hands after toileting and before meals.**
- **Assist/ remind resident with/ to brushing teeth daily.**
- **Encourage/ cue resident to perform activities and assist as needed.**
- **Trim resident fingernails, as needed.**

7. DRESSING

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

- **Assist resident with choosing clothes to wear.**
- **Assist resident with dressing and undressing**
- **Fasten clothing and put on and take off footwear.**

8. BATHING

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

- **Assist resident with bathing tasks: wash hair, face, back, leg, feet, perineal area, drying, dressing, etc.**
- **Check water temperature.**
- **Ensure resident has privacy.**
- **Ensure resident is not left unattended.**
- **Apply lotion on resident after drying.**

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

- **Encourage/ cue resident to perform activities and assist as needed.**

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:

- **Ensure self-administered medications directions are followed.**
- **Assist resident with medication administration.**
- **Administer medication.**
- **Reorder medications.**
- **Report adverse reactions to medications.**
- **Maintain Medication Administration Record and document date and time of "PRN" or "As-Needed" medication.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

- **Ensure administration of medication per Physician orders: correct dosage and correct time...**

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:

- **Delegated nursing services.**

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

- Medication administration.

- Diabetic.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

N/A

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

N/A

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: **At all time (provider lives in the home).**
- Awake staff at night
- Other: **Awake at night as needed.**

ADDITIONAL COMMENTS REGARDING STAFFING

N/A

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:

N/A

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

N/A

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:

Required level of care/ services correspond with associated pay.

ADDITIONAL COMMENTS REGARDING MEDICAID

N/A

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:

Movies, local newspaper, cable television, cards, and board games, etc.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

N/A

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