



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Binder Adult Family Home/Johnny Gormley	LICENSE NUMBER 752921
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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

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. Male residents only. The Binder AFH incorporates principle values regarding quality care. We recognize all residents as individuals that have rights and self determination. We will protect the rights of all our residents. We are located in the mountains near Colville, WA. Beautiful views and spectacular wildlife.	
2. INITIAL LICENSING DATE 08/01/1983	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: 2505 S. Timberlane Drive, Verdale, WA. 99037 (Spokane Valley, WA.)
4. SAME ADDRESS PREVIOUSLY LICENSED AS: N/A	
5. OWNERSHIP <input checked="" type="checkbox"/> Sole proprietor <input 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:

Set-up, puree foods, assist residents, special diets with prescription, spoon feedings if required, attempted to meet all needs of the resident. If residents need cannot be met DSHS will be notified to move resident to a more skilled facility.

2. TOILETING

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

toilet rails, raised seating, shower bars, hand rails, snake shower head, stools, supervision and assistance when needed, complete bathing if necessary, bed bathing supported by physician.

3. WALKING

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

Caregiver assistance, also available in home, walkers and wheel chairs.

4. TRANSFERRING

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

Physical assistance by caregiver, transferring to chairs, beds, vehicles. Lifts can be purchased if required.

5. POSITIONING

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

Position and reposition at scheduled times, making resident comfortable and safe at any given time.

6. PERSONAL HYGIENE

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

Combing hair, brushing teeth, shaving, washing and drying face, supervision, cueing and assistance

7. DRESSING

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

Assisting resident with fastens, dress and street clothing, assist or total care, assist with prosthesis.

8. BATHING

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

Assist with full body shower if resident is medically diagnosed, assistance in part, transfer in and out of shower, sponge bath, shampoo, resident will receive assistance for difficult areas to reach on request.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Care and assistance may change on a daily bases depending on the residents health at any given time.

~~Every attempt will be made to meet residents needs. Transfer to a higher skilled facility may be required.~~
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:

Assistance and Nurse Delegating assistance according to requirments listed in the above WAC

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Nurse delegating must be approved for each resident and each task before the task can be preformed

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:

DSHS may call in a Nurse otherwise None

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

Tube feedings, oral medication, topical creams, insulin (in home study required), dressing changes, oxygen delivery, SCN treatments, eye drops, ear drops, wound treatment, nebulizator treatment, blood glucose monitoring, irrigation of catheterization.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Nurse delegating must be approved for each resident and each task before the task can be preformed

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

Serving Developmental Disabilities for over 30 years

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: N/A
- Licensed practical nurse, days and times: N/A
- Certified nursing assistant or long term care workers, days and times: 7 days aweek on site
- Awake staff at night
- Other: **Except from 3 AM to 6:30 AM**

ADDITIONAL COMMENTS REGARDING STAFFING

Long term caregiver on site 24 hours a day unless the residents are with the caregiver on outings.

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:

Background should not be an issue English speaking is the only language in this Adult Family Home

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Resident needs to be able to communicate in the English language or a means that the caregivers can understand without having to hire a interpreter at the AFH expense .

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:

The Adult Family must receive a cost affective medicaid wage that will satisfy the costs , expenses and needs of the residents care plus cost of caregiver and AFH to administrate the care.

ADDITIONAL COMMENTS REGARDING MEDICAID

More cuts in the Medicaid program may force this AFH to stop accepting or close down entirely.

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:

Television, radio, puzzles, cards, some games, outdoor furniture, gardens, wildlife, outings, casino, church (Catholic) and shopping

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Other Church chooses are available for residents that don't need supervision. Caregivers are Catholic