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Residential Care Services
BAAU

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER	LICENSE NUMBER
EVE'S AFH	75297D

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. We are committed to providing an environment in our home where our Residents will continue to live their life in a dignified and respectful manner by offering a broad base of the highest quality Services

2. INITIAL LICENSING DATE: 10/21/15

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

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

5. OWNERSHIP

- ☐ Sole proprietor
- ☑ Limited Liability Corporation
- ☐ Co-owned by:
- ☐ Other:

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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: we prepared the food as the residents preference, cut food small pieces, if it is necessary mashed, puree and etc

2. TOILETING

If needed, the home may provide assistance with toileting as follows: if the resident need assistant we remind the resident to go to the bath room, clean if needed. If the resident totaly incontinent, we provide bed pan, urinal, commode chairs and etc.

3. WALKING

If needed, the home may provide assistance with walking as follows: we use gait or transfer Belt if safety if needed and help the resident to walk as much as he/she ca

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: we assist clients to transfer from bed to wheelchair, chair to wheelchair, to the bath tub etc. as the residents need we provide the necessary transferred.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: if the resident unable to position himself we provide positioning every 2 hours and as the residents preference.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows: we provide the necessary personal hygine routines, for Example, shaving, oral Hygine, Shampooing and combing hair, dressing, finger nail care, foot care, Skin care and etc.

7. DRESSING

If needed, the home may provide assistance with dressing as follows: if the resident unable to dress him self. we provide the opportunity to choices what to wear and assiste the resident starting from the affected part to the necessary steps

8. BATHING

If needed, the home may provide assistance with bathing as follows: As the resident's condition and need we provide, Complete bed bath, partial bed bath (if resident require assistance) tub bath, Shower and so on.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

if the resident unable to do his/her care. we provide the necessary action, and according to the residents preference.

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: if medication assistance is needed we remind the clients to take their medication. if medication administration is needed, our staff delegated by the nurse and provid the necessary assistance or administrat

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

our adult family home follows the doctors orders and if necessary steps is needed, we provide nurse delegation staff to do the work.

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: We provide delegated nursing service like medication administration, diabetic care.

The home has the ability to provide the following skilled nursing services by delegation:
Adminstration of medication. Application of eye drops or ointments, topical medication. Administration of insuline including oral, Subcutaneous, etc.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION
if our staff is qualified for the delegated service, we provide the task according to the 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
In the future, we will include Developmental disabilities Specialty

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: Mon - Sunday 24 hours
- ☒ Awake staff at night
- ☐ Other:

ADDITIONAL COMMENTS REGARDING STAFFING
EVE's AFH is provide the necessary care 24 hours 7 days a week with full supervision of the residents.

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:
EVE's AFH Staff speaks English, so to accomodate our clients needs we prefere residents who speaks English

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS
our AFH provide diffrent cultural food as the preference of our clients needs and the Staff speaks clear English that our clients understand.

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: we accept medicaid pay clients in all conditions.

ADDITIONAL COMMENTS REGARDING MEDICAID

EVE'S Adult Familyhome accept both private and medicaid 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: crafts and Holiday Events, Games (ballon volleyball, bingo, video games, etc) Gardening, bible, Studies, walk, and cooking activities

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Activities are planned based on individual interests, Personal preference, physical ability and group consensus.