



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Eden Abireha	LICENSE NUMBER 753023
--	---------------------------------

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

Received

JAN 07 2016

RCS/Public Disclosure

About the Home	
1. PROVIDERS STATEMENT (OPTIONAL) As Best Comfort Adult Family Home ,The optional provider’s statement is free text description of the mission, values, and/or other distinct attributes of the home. We aim to enhance the quality of life to our residents through supportive and a creative balance of physical wellness program. We are dedicated to provide a comfortable friendly and loving environment.	
2. INITIAL LICENSING DATE TBS	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> 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 provider's assist eating as follows.

We assist the residents with eating according to OT recommendation

2. TOILETING

If needed, the home provider's assist toileting as follows:

We assist the client toileting with people and home equipment grab bar's. As PT recommendation.

3. WALKING

If needed, the home provider's assist walking as follows:

We assist the client with walking according to the assessment.

4. TRANSFERRING

If needed, the home provider's assist transferring as follows:

The facility will always have full staffs to assist the client with transferring according to their assessment

5. POSITIONING

If needed, the home provider's assist positioning as follows:

The facility will always have full staffs to assist the resident's with positioning according to their assessment.

6. PERSONAL HYGIENE

If needed, the home provider's assist personal hygiene as follows:

The Adult Family Home assist the resident's with all personal hygiene.

7. DRESSING

If needed, the home provider's assist dressing as follows:

The Adult Family Home always assist resident's with dressing if needed.

8. BATHING

If needed, the home provides assistance with bathing as follows:

The Adult Family Home always assist the resident with bathing according to the assesment.

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:

All staffs will be nurse delegated and they will assist all clients according to MD orders and follow the 5 right.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Catheter care, Hospice care, Oxygen use, Diabetic care and Tube feeding.

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:

Visiting doctors and RN's as needed.

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

Visiting doctors and RN's as needed.

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

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: **As needed** _____

Licensed practical nurse, days and times: **As needed** _____

Certified nursing assistant or long term care workers, days and times: _____

Awake staff at night

Other:

ADDITIONAL COMMENTS REGARDING STAFFING

We have staffs 24/7

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:

All background and cultures are English, Amharic and Tgrigna

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

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

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:

TV, Karaoke, Cards, Puzzles, Gardening, Shopping, dine out, BBQ.

ADDITIONAL COMMENTS REGARDING ACTIVITIES