



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Nova House / Lori K. Brown	LICENSE NUMBER 753038
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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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RCS/Public Disclosure

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 provide quality care where residents & staff engage in meaningful relationships built on mutual respect. We are here to support and encourage independence. We are here to work for the residents and to help protect the dignity of each in their daily lives.	
2. INITIAL LICENSING DATE 04/02/2013	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: None
4. SAME ADDRESS PREVIOUSLY LICENSED AS: 301 E. First St., Cle Elum WA 98922	
5. OWNERSHIP <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:

We provide one person assistance with eating if prescribed in the residents care plan & allowed by law. Including special diets, nutritional supplements, grinding or blending foods, intake monitoring, specialized utensils and feeding residents.

2. TOILETING

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

We provide assistance to the toilet & with toileting if prescribed in the residents care plan & allowed by law. Including bowel programs, output monitoring, peri care & 2 hour toileting.

3. WALKING

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

We provide one person assistance with walking if prescribed in the residents care plan & allowed by law. Including assistance with walkers, gait belts, canes or wheelchairs.

4. TRANSFERRING

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

We provide one or two person assistance with transferring if prescribed in the residents care plan & allowed by law. We can use verbal cueing, gait belts, grab bars, sit-to-stand & hooyer.

5. POSITIONING

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

We provide one person assistance with positioning if prescribed in the residents care plan & allowed by law. We use a 2 hour turn program for bed bound residents with bolsters & pillows for support.

6. PERSONAL HYGIENE

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

We provide one person assistance with personal hygiene if prescribed in the residents care plan & allowed by law. We can assist with brushing of teeth, make-up, styling hair, polishing nails, haircuts and shaving.

7. DRESSING

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

We provide one person assistance with dressing if prescribed in the residents care plan & allowed by law.

8. BATHING

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

We will provide one person assistance with bathing if prescribed in the residents care plan & allowed by law.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We try to help residents keep as many "activities of daily living" as long as they are capable

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:

We provide any assistance with medication administration that is prescribed in the residents care plan & allowed by law. Medications are kept locked up. We can crush, or use liquid medications on Dr. orders.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We have Nurse Delegation when needed to administer medications.

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:

All services are directed by residents Dr., is outlined by nurse delegation & allowed by law. We have an R.N. home health visit once a month and an on call nurse 24 hrs. We use Hospice for end of life care.

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

We can provide all services directed by the resident's Dr., allowed & outlined by nurse delegation and allowed by law.

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: **Visits one time a month & can be called 24hrs/7days a week. R.N. does any delegations or assessments needed on these visits.**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **7 days a week: seven CNAs that over lap shifts 3x a day. Shifts: 8a to 4p, 3p to 6:30p, 5:30p to 10a.**
- Awake staff at night
- Other:

<p>ADDITIONAL COMMENTS REGARDING STAFFING</p> <p>Care givers all have specialty training in mental health,dementia and for nurse delegation.</p>
<p align="center">Cultural or Language Access</p>
<p>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)</p>
<p>The home is particularly focused on residents with the following background and/or languages:</p> <p>No focus on any ethnic background or language. English language spoken, french speaking care giver available</p>
<p>ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS</p> <p>We try to accommodate each residents cultural traditions and wishes.</p>
<p align="center">Medicaid</p>
<p>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)</p> <p><input type="checkbox"/> The home is a private pay facility and does not accept Medicaid payments.</p> <p><input checked="" type="checkbox"/> The home will accept Medicaid payments under the following conditions:</p> <p>We accept one Medicaid resident out of six.</p>
<p>ADDITIONAL COMMENTS REGARDING MEDICAID</p>
<p align="center">Activities</p>
<p>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).</p> <p>The home provides the following:</p> <p>We can provide board games, puzzles, cards, movies, crafts and bingo. We plan a birthday party for each resident, we have an annual 4th of July family barbeque, we will take residents to the 4th parade, and we have an annual Christmas party that all family members are invited to.</p>
<p>ADDITIONAL COMMENTS REGARDING ACTIVITIES</p> <p>Provider accompanies residents to most Dr. appointments, will take them to church services, shopping or to visit someone.</p>

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