



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER <i>Yohana Adult Family Home / Yohana Samuel</i>	LICENSE NUMBER <i># 753042</i>
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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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Received

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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. <i>An inclusive, welcoming home environment providing quality services with tender, loving, respectful care.</i>	
2. INITIAL LICENSING DATE <i>1/22/16</i>	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
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 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:

Changing diet to accommodate resident needs, staff will feed residents as needed.

2. TOILETING

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

Residents will be assisted by the caregiver to go to the bathroom to foster continence, night time assistance to use bedside commode, or wearing attendants, will be changed as needed.

3. WALKING

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

Residents will be assisted to ambulate as much as possible, caregiver will take resident out for a walk daily. If walker or wheelchair necessary we will have the resident use it.

4. TRANSFERRING

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

Staff will assist resident with transferring from bed, to chair, to toilet as needed, if necessary we have a hoist lift to assist w/ transfers for patient and staff safely.

5. POSITIONING

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

When getting ready for bed, patient will be put to bed safely, if needed patient will be turning position during the night to prevent skin issue.

6. PERSONAL HYGIENE

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

Staff encourages independence with personal care and caregiver is on stand by at all times to assist with bathing, showering, pericare. We are always checking the residents their skin, urinary tract infection or constipation.

7. DRESSING

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

Resident will be encouraged to select own clothes, and wear appropriate clothes. Staff will assist resident at all time.

8. BATHING

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

Showers, and hairwashing is three times a week or as often as needed, staff will encourage residents to do as much possible for them self.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Staff will assist and accommodate residents in any way for dignity and 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:

Staff is able to provide assistance oral med, drops, and lotions

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Medications are ordered from local pharmacy and set up in a bubble pack. If there are any complication, the staff will contact Doctor.

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:

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

Medication, nasal spray, eye drops, and creams.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Staff will call nurse delegation for any new medication to provide teaching, assessment, and intervention.

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: _____
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: 24 hour, 7 days a week
- Awake staff at night
- Other: _____

ADDITIONAL COMMENTS REGARDING STAFFING

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:

Not distinguished

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:

Activities are arranged depending upon availability of resident, family or caregiver takes residents

ADDITIONAL COMMENTS REGARDING ACTIVITIES

to doctor appointment or outing.