Washington State Department of Social & Health Services
Transforming lives

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER	LICENSE NUMBER
BRIDEFORCHRIST AFH,LLC	753145

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.

The Adult Family Home where clients feel at home to be cared according to their assessment . Our mission & purpose is to provide care and ensure that each of our resident is cared for in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life including a safe, clean, comfortable, and home like environment.

2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
	NONE

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

N/A

5. OWNERSHIP

- ☐ Sole proprietor
- ☒ 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 may provide assistance with eating as follows:

We prepare nutritious well balanced meals, including Asian, Italian & American dishes. We may provide assistance with eating from cuing, reminding, monitoring, cutting up food, guide clients on food/drinks..

2. TOILETING

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

W e provide assisteance with toileting from set up, monitoring, encouragement, cueing assistance with cleansing care, pads, clothing, and or stand by assistance that respect the residents privacy. One person assist.

3. WALKING

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

We provide walking assistance from cuing, monitoring, monitoring, stand by assistance. May use walker, wheel chair or cane with one person assist.

4. TRANSFERRING

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

We can assist with one person transfering according to each individuals care plan, from lift and sit, including stand by for safety, cuing, hands on guidance, encouragement. May use gait belt or Hoyer.

5. POSITIONING

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

We assist with resident sitting up in bed, roll over, elevating the feet, repositioning at regular intervals, encouragement, adjusting pillows, one person assist according to the care plan.

6. PERSONAL HYGIENE

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

We encourage good personal hygiene. We can help with set up, cuing, monitoring, guidance, Assists with nail care, showering, brushing teeth, skin care, all according to the care plan.

7. DRESSING

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

We can provide assistance with dressing, from set up, cuing, help with socks, pants, shirts, coats, buttoning and encouragement in the individuals choice of dress.

8. BATHING

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

We provide full bath or assistance in bathing if necessary to provide good care. We can provide help with set up of supplies, cuing, or privacy depending on the individuals care plan. One person assist.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We provide assistance with denture care, eye glasses and hearing aid.

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 can provide medication assistance medications as ordered by nurse delegation. We may order, prepare, monitor, document and store medications in a secured lock cabinet.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We will be diligent in following Doctors and Nurses orders.

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:

Medication assistant and Administration by qualified by nurse delegator.

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

Wound care, medication mangement and administration as delegated.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

We provide care to individuals with level 1,2 and level 3 with one person assist.

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

Certifications in: H.C.A., Developmental Disabilities, Dementia, Diabetes, Modified Fundamentals of Caregiving, Managerial Dementia & Mental Specialty Training, Caregiver Mental Health & Dementia Training, Parkinson's Disease Caregiver training, Two years experience working in an Adult Family Home Care, working with DD's, with Dementia, mental, Parkinson's, strokes Residents.

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: **Available for nurse delagation tasks.**
- ☐ Licensed practical nurse, days and times: _____
- ☐ Certified nursing assistant or long term care workers, days and times: **24/7**
- ☐ Awake staff at night
- ☒ Other: **Staff are available to wake up at night if needed.**

ADDITIONAL COMMENTS REGARDING STAFFING

The provider/manager work in the home & if needed can hire a qualified caregiver.

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:

Use English, and Philippines language.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Provider/manager cook nutritious well balance food, we accommodate resident preferences.

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:

Medicaid payments are accepted as long as the guidelines of Medicaid are followed.

ADDITIONAL COMMENTS REGARDING MEDICAID

Private pay resident converts to medicaid funding, we request a 60 day notice before it occurs.

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:

Reading, watching tv, listening to music, singing, drawing, coloring, art and craft, puzzles, Xbox games, light exercise, party time, gardening, ball games, cards games, out for walk, and consider suggestions.

ADDITIONAL COMMENTS

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Driving the residents sometimes. Family and friends visits.

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