



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Elder Options Adult Family Home of Kelso	LICENSE NUMBER 753216
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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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About the Home	
<p>1. PROVIDERS STATEMENT (OPTIONAL)</p> <p>The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home.</p> <p>Our mission is to provide quality care so that you or your family member can thrive in the comfort of their new home. We have a commitment to the growth, health, and prosperity of the client and our employee's.</p>	
2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: None
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
<p>5. OWNERSHIP</p> <p><input type="checkbox"/> Sole proprietor</p> <p><input type="checkbox"/> Limited Liability Corporation</p> <p><input type="checkbox"/> Co-owned by:</p> <p><input type="checkbox"/> Other: C - Corporation</p>	
Personal Care	
<p>"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)</p>	
1. EATING	

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

Each clients nutritional and feeding needs are considered. From cuing and monitoring to full assist.

2. TOILETING

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

Each client's toileting needs are taken into account, from cuing and monitoring to full physical assist, to incontinence. Each client's room has a 1/2 bath.

3. WALKING

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

Each client's walking/mobility needs are taken into account, from cuing and monitoring to full physical assist.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows: Our home provides transfer assistance from cueing, to monitoring, to full body transfers as needed. We have proper lifting equipment such as a hooyer and gait belts. We assist with bed, chair, and wheelchairs transfers, and also assist in and out of showers and off toilets.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows: Each clients positioning requirements will be taken into account and monitored. Repositioning can be done as required to prevent skin breakdown and residents are encouraged to reposition during the day when sitting for long periods of time.

6. PERSONAL HYGIENE

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

Each client's hygiene is of the utmost importance. Cueing, monitoring, to full assistance is provided if needed. Personal items, such as Dentures and Hearing aids, are cleaned as needed.

7. DRESSING

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

We provide assistance with dressing, from cueing, set-up, and monitoring, to total assistance as needed. Each client is can make their own decisions on daily wear if possible.

8. BATHING

If needed, the home may provide assistance with bathing as follows: Home is equipped with a central walk-in shower with bench seat (no bathtub). Wheelchair assessable. Shower Aide provided.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We consider each clients personal care as a vital piece to their well-being and self esteem. It is our responsibility to make sure our clients look and feel their best at all times.

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:

Medication cuing, monitoring, dispensing to Nurse Delegation administration

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Our home has the support of a delegated RN. Medications are bubble wrapped.

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:

Skilled nursing provided through nurse delegation contract.

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

Each clients needs are reviewed and approved through our Nurse Delegated RN.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Our staff meet all state educational requirements. We fully fund their required CEU's as we believe an educated caregiver provides the best care.

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 Our Staff meet all state educational requirements. We encourage CEU's that can translate to better care for our clients.

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: We have a Registered Nurse available on call.
- Licensed practical nurse, days and times: 90-day assessments for nurse delegated clients and as needed
- Certified nursing assistant or long term care workers, days and times: 7 days a week (6am - 10pm) and as needed at night
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING Resident care manager lives in the upstairs living area. When the RCM is off duty the common area for the caregiver is also located upstairs. Home is equipped with non-common area video monitors, available for the client's room (with consent) and call buttons.

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:

Our Home focuses on English speaking residents but is open to all types of backgrounds and cultures.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Willing to accommodate as much as possible

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:

Notice of changes

ADDITIONAL COMMENTS REGARDING MEDICAID We will accept Medicaid payments under the condition that our home has the ability to meet the individual's needs.

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: Our home focus on providing healthy, non-processed, well rounded meals. We encourage daily walking and range of motion exercises to maintain mobility as well as getting outside if weather permits. We engage in games, crafts, celebrating birthdays, national holidays and events.

ADDITIONAL COMMENTS REGARDING ACTIVITIES We identify activities/hobbies for each resident to keep them engaged. Staff can assist in making arrangements for out of home activities and transportation as well as communication with family and loved ones via electronic media, such as skype. Our home also provides bi-monthly hair cuts.

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