



Adult Family Home Disclosure of Services Required by RCW 70.128.280

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| HOME / PROVIDER Ridgefield Adult Family Home | LICENSE NUMBER 753601 |
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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 | |
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| 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. Ridgefield AFH provides care for adults and the elderlies. Our core values focus in respecting the rights of each resident, and help them maximize their fullest potential through encouragement and follow-up to build a healthy relationship with all residents and their families and guardians. It is also our mission to create a compassionate, caring and competitive environment that nourishes the various needs of our residents. | |
| 2. INITIAL LICENSING DATE <div style="font-size: 1.2em; margin-left: 20px;">2/16/18</div> | 3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: <div style="margin-left: 20px;">None</div> |
| 4. SAME ADDRESS PREVIOUSLY LICENSED AS: | |
| 5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Company <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:

Provides supervision and cueing with eating. It also helps with feeding whenever it is necessary.

2. TOILETING

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

Provides assistance with toileting that includes cueing, monitoring and extensive assistance.

3. WALKING

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

Provides assistance with walking that includes supervision, and one on one personal assistance.

4. TRANSFERRING

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

Provides assistance with transferring which includes supervision, and one on one personal assistance.

5. POSITIONING

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

Provides assistance with positioning from cueing to one person assist.

6. PERSONAL HYGIENE

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

Provides assistance with personal hygiene from supervision and cueing to one person assist.

7. DRESSING

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

Provides assistance with dressing which includes supervision, cueing and one person assist.

8. BATHING

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

Provides assistance with bathing which includes supervision, cueing and one person assist.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

5 bedrooms; 4 with individual toilet and closet. The 5th has a full bath, toilet & closet. A common shower

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:

done according to the resident's assessment and negotiated care plan. The home also closely works with the assigned nurse delegator to provide this service and get the proper instructions and recommendations.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We do not accept residents requiring sterile dressing, and on IV infusion.

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:

Closely works with RN nurse delegator to delegate tasks to caregivers.

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

Medication administration, caring for fully catheter and colostomy bag etc.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Blood suger checking, insulin injection and nonsterile wound dressing.

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

All caregivers who will be hired to work will have the above speciality care training.

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: **Daily 7 days a week and 24 hours a day.**
- Awake staff at night
- Other: **Awake staff available between 5:30 AM and midnight. Responds to calls between midnight and 5:30 AM.**

ADDITIONAL COMMENTS REGARDING STAFFING

We only accept residents with one assist. No total care, or 2 or more person assist accepted.

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:

English or Amharic (Ethiopin language)

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DSHS 10-508 (REV. 06/2016)

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:

Accepts both private and medicaid if not alcoholic and drug-abuse clients. We may accept smokers provided they accept to smoke in the designated area outside the house, and do not get out of the house for smoking before 6:00 AM and after 9:00 PM.

ADDITIONAL COMMENTS REGARDING MEDICAID

If a private pay client runs out of funds & qualifies for medicaid, he/she can continue living in the facility provided the house maintains the minimum two private and 4 medicaid resident room allocations

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:

Provides the following activities and more: Reminiscing, current news discussions, small gardening, light exercise, movie watching and indoor games (cards, bingo, domino etc)

ADDITIONAL COMMENTS REGARDING ACTIVITIES

We celebrate birth days, national holidays and some special events. We are always open to suggestions and encourage residents and family members to comeup with ideas and inputs.

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