

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Meadow Crest Senior Home LLC/ Gurminder Kaur	LICENSE NUMBER 753682
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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 goal is to give our residents quality medical care by our licensed nursing staff while providing a home like environment. Our home is cozy and friendly and our caregivers have one mission, and that is to help you or your loved ones have the best quality of life we can help them obtain.</p>	
<p>2. INITIAL LICENSING DATE</p> <p>03/12/2018</p>	<p>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</p>
<p>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</p>	
<p>5. OWNERSHIP</p> <p><input type="checkbox"/> Sole proprietor</p> <p><input checked="" type="checkbox"/> Limited Liability Corporation</p> <p><input type="checkbox"/> Co-owned by:</p> <p><input type="checkbox"/> Other:</p>	

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:

- **Promote and supervise those who are able to find themselves but are at risk for choking.**
- **Physical assistance with feeding those who are unable to feed themselves.**
- **Puree diet / soft diet**

2. TOILETING

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

- **Encouraging, promoting, and supervising who are able to use the toilet.**
- **Provide complete physical assistance who are unable to go toilet or are incontinent.**

3. WALKING

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

Hands on support with walkers and wheelchairs to help maintain safe mobility. Provide passive range of motion exercise for those who are unable to walk.

4. TRANSFERRING

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

- **Encourage those who are able to transfer on their own.**
- **Provide physical assistance and supervision as needed for transfers.**
- **Use Hoyer lifts for those who are unable to assist with transferring.**

5. POSITIONING

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

All residents that need assistance with positioning will be helped every 2 hours and as needed for comfort.

6. PERSONAL HYGIENE

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

Our AFH will provide assistance with dental hygiene, personal hygiene, or hygiene issues related to incontinent care. We encourage and assist with nail care as long as the resident is not a diabetic or has other issues that stop them from getting basic nail care in the AFH.

7. DRESSING

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

Encourage those who are able to dress themselves. Provide physical assistance for those who are unable to dress on their own.

8. BATHING

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

Provide full or partial physical assistance with showering as needed for residents. Bed baths can also be given as needed.

9. ADDITIONAL COMMENTS REGARDING PERSONAL 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:

All medication issues are considered and our caregivers are trained to be delegated

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Medications are ordered, documented and verified by the Physician prior to administration

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:

Registered Nurse or Licensed Practical Nurse available only on a contracted basis as provided through DSHS.

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

Catheter changes, blood sugar monitoring and care, eye care, and blood pressure check

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

Our home is open and the residents can see us easily and find us easily, we are well suited for the above 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: **as required, upon insurance approval**
- Licensed practical nurse, days and times: **as required, upon insurance approval**
- Certified nursing assistant or long term care workers, days and times: **24 hours per day / 7 days per week**
- Awake staff at night
- Other: **One-person night staff can be provided on a case by case basis at an additional charge.**

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:

English, Punjabi, Hindi

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:

We prefer 2 years to conversion for residents moving from private funds to Medicaid, but take each person on a case by case basis.

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:

We will provide activities that are meaningful to the resident, his/her quality of life and interest. The home will attempt to determine what activities the resident enjoyed in the past if possible and encourage those, such as gardening, light exercise, celebration of birthday and holidays, music, etc.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

We will always aim to keep the residents happy and engaged in activities they enjoy. In my experience as a HCA, I have learned that each of us needs a purpose, no matter how big or small, that provides motivation and inspiration for our lives.