



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Westview Care/ Maria Flaris	LICENSE NUMBER 754084
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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	
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. Our mission is to promote the fulfillment, longevity and quality of life for all those who reside in our adult family home including both our residents and staff members alike. We strive to build our home as a place where families may gather to continually enhance the quality of their relationships and enable all of our residents and staff members to discover, realize, and live their legacy.	
2. INITIAL LICENSING DATE 6/5/2019	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
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:

The home can accommodate residents whose needs range from cueing to total assist during meals. The home also can assist residents who are on tube feed.

2. TOILETING

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

The home can accommodate residents whose needs range from cueing to total assist for toileting.

3. WALKING

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

The home can accommodate residents whose needs include reminding the resident to use their mobility device, stand-by assistance, and one-person assistance

4. TRANSFERRING

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

The home can accommodate residents whose needs include stand-by assistance, one-person assistance and total assistance. If a resident requires a transfer medical device, such as a sit-to-stand or Hoyer Lift, the staff have been properly trained to use the device but the facility does not provide the device.

5. POSITIONING

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

The home can accommodate residents whose needs range from stand-by assist to total assist.

6. PERSONAL HYGIENE

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

The home can accommodate residents whose needs range from cueing to total assistance.

7. DRESSING

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

The home can accommodate residents whose needs range from cueing to total assistance.

8. BATHING

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

The home can accommodate residents whose needs range from cueing to total assistance. The home has a roll-in shower.

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:

The home can accommodate residents whose medication needs range from setting up to administration. The home also works with a local pharmacy for medication orders and delivery. The home monitors the

resident's medications and notifies their physician if a medication is refused.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

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:

Home health agencies, hospice agency, occupational therapist and physical therapist visit the home when a resident in the home is in need of one or more of these services. These services are arranged by the resident, their guardian or case manager.

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

Nurse delegation means a registered nurse transfers the performance of selected nursing tasks to competent and qualified nursing assistants. Staff at Westview Care are competent and qualified to perform certain nursing tasks through nurse delegation, and the facility contracts with a RN for nurse delegation. Delegation may include tasks such as oxygen, insulin injections, simple wound care, and crushed medications.

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

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: **Nurse delegator available as needed and as required for the delegation process.**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **Twenty-four hours a day, seven days a week.**
- Awake staff at night

Other: **All staff are trained in Mental Health and Dementia, are CPR/first aid certified, have a food safety certification/handler card, pass a name and date of birth and fingerprint background check and take 12 hours of continuing education annually.**

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:

The home and its staff respect the residents and each other regardless of their heritage or ethnic background. We welcome and are open to how others celebrate special events. The staff in the home primarily speak English.

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 accept Medicaid payment source and in order to provide quality service, require a minimum daily rate of \$133

We require Residents who are using private funds to do so for twenty-four months before transitioning to the Medicaid payment system. In order to assure there's adequate time to process the Medicaid paperwork and there's not a lapse in payment, we require the resident to provide the home written notification 60-days prior to them transitioning to the Medicaid payment system.

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:

Morning stretch, table games, arts and crafts, music therapy, gardening, ice cream social, newspaper/current events reading

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Activities are based on the residents preferences. We encourage them to do activities as tolerated.

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

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