



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER COMFORT AND CARING ADULT FAMILY HOME LLC	LICENSE NUMBER 754220
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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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Management Services
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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. At Comfort and Caring Adult Family Home LLC: Our mission is to provide quality care, safe, and loving environment. We work hard to exceed the expectations of our clients and their family members. Comfort and Caring Adult Family Home LLC is very inviting, peaceful, bright home with lots of natural light.	
2. INITIAL LICENSING DATE 09/12/2019	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: N/A
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:

Supervising clients during meal times eating assistance from cuing and monitoring to total assistance.

2. TOILETING

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

When appropriate, encourage routine schedules. Provide assistance with cuing and monitoring, stand-by assistance, bladder incontinence, bowel incontinence with routinely cleaning, partial or total assistance.

3. WALKING

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

Provide monitoring assistance, stand-by assistance, partial assistance and one-person physical assistance. Reminding clients to use assistive devices and cueing on correct use of assistive devices.

4. TRANSFERRING

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

Provide cuing and monitoring, supervision or stand-by assistance, one-person physical assistance and hoist lift transfers.

5. POSITIONING

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

Provide assistance to maintain correct posture position and reposition to reduce weakening and stiffening of muscles and encourages proper breathing and digestion. Remind clients or assist with repositioning every two hours to avoid bed sores.

6. PERSONAL HYGIENE

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

Provide cuing, set up, grooming tasks, oral care and total assistance.

Assistance with hair care, oral care, shaving, nail care, showers, baths and bed baths for clients who are unable to shower. Application of lotion, deodorant and makeup.

7. DRESSING

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

Provide supervision, set up, partial assistance and total assistance with dressing.

8. BATHING

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

Provide supervision, stand-by assistance, physical assistance getting into/out of the shower, partial assistance, bed baths and total assistance during bathing.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Comfort and Caring Adult Family Home LLC encourages client to be as independent as possible.

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:

**Provide cuing and supervision during medication administration.
Reminding clients to take their medications on time and as prescribed.
Assist with oral medication administration through nurse delegation.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

All medications are managed through a LTC and state compliant pharmacy.

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:

Comfort and Caring Adult Family Home LLC may contract with an RN delegator for nurse delegation. The home is owned and managed by an long term care worker who has many years working in long term care and hospitals.

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

Orals/topicals medications, eye/ear/nose drops, suppository, inhalers, blood glucose monitoring, insulin, oxygen therapy and ostomy care.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Comfort and Caring Aduly Family Home LLC provides 24/7 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

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: **24 HOURS A DAY 7 DAYS A WEEK**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

Staffs at Comfort and Caring Adult Family Home LLC has completed all trainings required by the state.

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

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

Comfort and Caring Adult Family Home LLC may assists and will respects our client's ethnicity, culture, beliefs and pratices.

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 will accept Medicaid residents with at least 5 months private pay funding.

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:

Comfort and Caring Adult Family Home LLC will offer activities and consider clients

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Exercise programs, card/board games, puzzles, bingo, movie night, ice cream/ tea party, traveling to library, birthday party and holiday celebration.

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