



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER A CARE HAVEN: Georgina Njuguna	LICENSE NUMBER 754444
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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>At A Care Haven, we provide care to clients with Dementia, and Mental Health.</p>	
<p>2. INITIAL LICENSING DATE</p> <p>3/13/2020</p>	<p>3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:</p> <p>8513 Madrona Lane, Edmonds WA 98026</p>
<p>4. SAME ADDRESS PREVIOUSLY LICENSED AS:</p> <p>Cedar View AFH</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:

All assistance needed with eating will be provided including Accommodating special diets within reason, Cuing, cutting up food, and total eating assistance.

2. TOILETING

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

All toileting assistance will be provided. Ranging from supervision, stand by assistance to total toileting assistance.

3. WALKING

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

All walking needs will be provided as follows. Supervision for safety, Standby assist, and one person physical assist.

4. TRANSFERRING

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

All Transfer assistance will be provided as follows. Supervision, Stand by assist and guidance, one person physical assist, Transfers with mechanical lifts and other physical assist devices.

5. POSITIONING

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

All positioning and repositioning needs will be provided including, cuing, monitoring, one person assist, two person assistance, and repositioning with mechanical lifts/devices.

6. PERSONAL HYGIENE

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

All Personal hygiene needs are provided including cuing, standby assist, one person physical assist, and total assist with all aspects of personal hygiene.

7. DRESSING

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

All dressing needs will be provided including, cuing, set up assist, to total assist with dressing needs.

8. BATHING

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

All bathing assistance is provided including, cuing, set up, standby assist and total assistance with all aspects of bathing.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

A Care Haven can accommodate care to clients who may need 2 person assist or mechanical lift assistance, and Awake Caregivers when need arises

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:

We provide all medication needs. Nurse delegation will be provided for all clients needing these kind of services.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We use one Pharmacy for all clients and medications are compliance packaged to ensure safety of clients.

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 services such as wound care, tube feeding, can be provided through in home nurses, who also offer thier Hospice, Home health (physical therapy, occupational therapy and speech therapy) to provide the unique range of care needs that our clients may need. If ned arises we do have in home doctors.

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

All skilled nursing services allowed by WAC i.e Medication adminstration, Tube feeding, diabetic insulin management.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

The provider and the Nurse Delegator closely supervise all matters relating to medication management

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

Provider has 10 + years of experience in healthcare field.

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: **On call 24 hrs 7 days /week**
- Licensed practical nurse, days and times: _____
- Certified nursing assistant or long term care workers, days and times: **24 hrs/day- 7 days /week**
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

The home currently has no awake staff at night, but will consider awake staff on client by client basis.

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:

Residents cultural and ethnic backgrounds will be respected and accomadated within reason.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

None.

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:

private pay for 3 years

ADDITIONAL COMMENTS REGARDING MEDICAID

NONE

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:

Music, Shopping, Bingo, Playing Cards, Birthday and holiday celebrations, Word search, Movie nights, daily exercises including walking and stationary biking.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

None