



# Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER TERRI GOLD ADULT FAMILY HOME LLC LICENSE NUMBER 754519

**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 VALUES AND COMMITMENT TO OUR RESIDENTS ARE OF HIGHEST PRIORITY. WE BELIEVE IN THE PRESERVATION OF DIGNITY, SELF RESPECT AND RESIDENT'S RIGHTS ARE PARAMOUNT TO LOVING AND CARING ENVIRONMENT. OUR GOAL IS TO SATISFY NOT ONLY THE RESIDENTS BUT ALSO THEIR FAMILIES.**

### 2. INITIAL LICENSING DATE      3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:

05/22/2020

### 4. SAME ADDRESS PREVIOUSLY LICENSED AS:

105 NAVAL AVE BREMERTON WA 98312

### 5. OWNERSHIP

- Sole proprietor
- Limited Liability Corporation
- Co-owned by:
- 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:

**Cook and prepare client's meal. Cutting food into small bites. Cuing and feeding client. Prepare snack for working client. Clean and wash dishes after meals.**

2. TOILETING

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

**Washing and cleaning perianal area especially after moving bowel. Changing pull-ups. Checking for any skin problems on perianal area.**

3. WALKING

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

**Holding client's hand and guiding them specially in crossing the streets.**

4. TRANSFERRING

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

**Lifting client out of chair. Getting client out of bed. Assisting in getting out of the car.**

5. POSITIONING

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

**Check client for proper positioning while sleeping. Assist in positioning while in bed.**

6. PERSONAL HYGIENE

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

**Brushing client teeth. Trim fingernails and toenails. Shave armpit and legs. Wash face and perianal area. Applying lotion to body. Applying deodorant. Comb hair.**

7. DRESSING

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

**Assist in choosing the appropriate clothing for the weather. Dressing the client. Putting on socks. Fasten and button clothes. Putting on bra and underwear. Checking backpack prior to leaving the AFH.**

8. BATHING

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

**Give bath and shower. Shampoo and condition client's hair. Dry client's body with towel. Applying lotion to body. Comb hair.**

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

**Checking skin of diabetic client. Check client if doing the right handwashing.**

**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:

**Oral medication is being prepared in med. organizer with client's name on it. Gives the right med. organizer to client. Administers insulin with nurse delegation . Administers topical meds. with nurse delegation. Mixes Metamucil and Miralax with water.**

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

**. Provider prepares medications in the med.organizer. Provider accompanies client to medical , dental and KMH appointment.**

### **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:

**Monitors blood sugar.Administers insulin to client.**

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

**Administers insulin. Applying topical meds.Checking blood sugar.**

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

**.The AFH has a nurse delegator that visits every 3 months.**

### **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

**Current staff have completed all the Specialty 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: **Provider is a Certified Nursing Assistant and always available at AFH.**

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Licensed practical nurse, days and times: **Thursday, Friday and every other weekend.**

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Certified nursing assistant or long term care workers, days and times: **Monday, Tuesday, Wednesday and every other weekend.**

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Awake staff at night

Other:

#### ADDITIONAL COMMENTS REGARDING STAFFING

**Staff gets 5-6 hours of sleep at night time once all client are sleeping .**

#### 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:

**All ethnic background that speaks English as a main language.**

#### ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

**Encourage resident to participate cultural activities with their family.**

#### 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:

**In the event the private pay resident is no longer able to maintain the status of private pay the resident has the right to choose if she want to stay in (AFH). We will honor the change of status of pay. We will keep the resident and give the same care as when the resident is private pay.**

ADDITIONAL COMMENTS REGARDING MEDICAID

**AFH will reserve the right to assess the resident to make determination if the AFH is able to provide necessary services with 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:

**TV time, Movie time, music time thru radio or CD, dancing coloring and reading. Birthday celebration either eating out or party at AFH. Field trip once or twice a year like going to Tulip Festival at Mt. Vernon.**

ADDITIONAL COMMENTS REGARDING ACTIVITIES

**Transportation is provided. Set ACCESS schedule when client has outside activities like ARC dance, ARC class, EADS outing, ARC outing and Special Olympics.**