



Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Comforting Hands AFH, LLC	LICENSE NUMBER 754539
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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. At "Comforting Hands" we strive to provide more than just a place to live, we offer a warm and beautiful home enviroment. We celebrate life and experiences that each day brings. We have a friendly, dedicated 24 hour awake staff. We accept male and female residents. We serve balanced, home coked meals.	
2. INITIAL LICENSING DATE 5/26/2020	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: N/A
4. SAME ADDRESS PREVIOUSLY LICENSED AS: N/A	
5. OWNERSHIP <input checked="" 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:

We provide assistance with whatever the resident's levels and needs are. We accept residents that are independent through who are totally dependent. We will assist with queuing, prompting, monitoring, supervising and perform direct care tasks. We accept those who are on modified diets and those on feeding tubes.

2. TOILETING

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

We provide assistance ranging from independent to total assistance. We document, monitor and assist our residents at whatever level of care they need.

3. WALKING

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

We provide care by monitoring, queuing and assistance at whatever level the resident needs. We provide residents with one to two person assistance. We also use medical equipment as necessary to aide with their mobility. 1 on 1 assist with walkers, wheelchairs, etc.

4. TRANSFERRING

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

We provide care ranging from independent to total dependent. We provide transfer assistance from queuing, monitoring and two person assistance. if needed, we use medical equipment as necessary for the resident's and caregiver's safety. Prior to accepting a new resident, we first look at how the new resident will affect the caregiver's

5. POSITIONING

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

We provide assistance with positioning ranging from queuing to monitoring to one person assist.

6. PERSONAL HYGIENE

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

We provide assistance with personal hygiene ranging from monitoring, queuing to total assistance. We strive to allow the resident as much independence as possible.

7. DRESSING

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

We provide dressing assistance ranging from independent to total assistance.

8. BATHING

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

We provide assistance with bathing ranging from independent with some queuing through total assistance. We encourage dignity, self-esteem and well being. We allow our residents to perform as much as they are able to independently. If needed we arrange for extra help with an additional caregiver or aide. We are able to use medical equipment to aide in caring for your loved one. We have a roll in shower, special shower chair and pedestal sink.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We have two private rooms and one shared room which has a curtain that be drawn for privacy.

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 a range of medication assistance from independent to completely dependent. We monitor and assist as necessary allowing the resident to have as much independence as possible and still remain safe. We maintain and abide by the WAC rules. We work with our pharmacy to provide the medications and delivery as needed. We communicate with MD to retain a close relationship ensuring our residents needs are met. We monitor and document. We report changes or adverse side effects to MD.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

We will accompany the resident to the doctors appointment as we are able.

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:

There is an RN who will delegate caregivers and residents as needed.

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

We have the ability to be delegated for oral, topical, diabetic insulin care, optical eye drops, nebulizer treatments feeding tubes, oxygen etc. When a resident's needs are out of our scope of care, we call the doctor and report issues. We help arrange for an "in home agency" to make visits as needed for as long as necessary.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

Our caregivers are qualified to be delegated by the Nurse Delegator.

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

We primarily take care of the elderly and dementia residents.

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: No regular hours, but there is an RN who is on call. The RN will come as needed for delegation purposes.
- Licensed practical nurse, days and times: No regular hours, but there is an LPN who is on call.
- Certified nursing assistant or long term care workers, days and times: We guarantee that there will be at least 1 caregiver on duty at all times. Occasionally there are 2 caregivers on duty. Caregivers work an 8 hour shift. (7am-3pm,3pm-11pm and 11pm-3pm)
- Awake staff at night
- Other:

ADDITIONAL COMMENTS REGARDING STAFFING

We have 24 hr awake staff. This way our residents will have care all the time.

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 are encouraged to believe and worship as they are accustomed. WE will assist them as needed. We do not discriminate and readily accept different cultures. We will accommodate their needs to the best of our ability. We encourage uniqueness and welcome each resident with open arms.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

We gladly welcome meal recipes from all areas and customs. We will accommodate cultural needs, as we are able.

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 require 24 months of private pay before a resident goes on Medicaid. When a resident transfers from Private pay to Medicaid, they will be asked to transfer to a shared room.

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:

Activities of daily living, card and board games. Coloring as well as solving puzzles. Library visits with residents able to check out books as well as visits to the Senior Center. Movie night with appropriate movie choice.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

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