



Adult Family Home Disclosure of Services

Required by RCW 70.128.280

HOME / PROVIDER: Good Rest Senior Care, LLC	LICENSE NUMBER <p style="text-align: center;">754553</p>
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NOTE: The term "the home" refers to the adult family home / provider listed above.

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. Good Rest Senior Care's mission is to provide tailored care that meets the needs of each resident. The provider specializes in mental health and will consistently ensure that every resident is treated with respect, compassion and dignity. We aim to provide holistic care in a true age-in-place Adult Family Home. Good Rest Senior Care is a family and friendly environment. Love and care is our commitment.	
2. INITIAL LICENSING DATE 6 /9 /2020	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED: <p style="text-align: center;">NONE</p>
4. SAME ADDRESS PREVIOUSLY LICENSED AS: 13304 119th AVE NE, Kirkland, WA 98034	
5. OWNERSHIP <input type="checkbox"/> Sole Proprietor <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	

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. [Table of Contents](#)

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Activities

Personal Care	
	<p>“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)</p>
1. EATING	<p>If needed, the home may provide assistance with eating as follows: According to each resident’s needs, preference and care plan, we provide eating assistance from cueing and monitoring to full assistance. We accommodate all diets and will cook soft or pureed foods if necessary.</p>
2. TOILETING	<p>If needed, the home may provide assistance with toileting as follows: According to each resident’s needs, preferences and care plan, we provide assistance with toileting from cueing and monitoring to total assistance. We assist with the use of bedpans, urinals, or commodes, if necessary.</p>
3. WALKING	<p>If needed, the home may provide assistance with walking as follows: According to each resident’s needs, preferences and care plan, we provide assistance with walking from cueing and monitoring to one or two person assist. We assist and encourage residents to use any of their assistance devices such as wheelchairs, canes, etc, while walking.</p>
4. TRANSFERRING	<p>If needed, the home may provide assistance with transferring as follows: According to each resident’s needs, preferences and care plan, we provide assistance with transferring from bed (room) to restroom and/or all common areas of the home. We assist and encourage residents to use their assistive device(s) while transferring from one place and/or location to another.</p>
5. POSITIONING	<p>If needed, the home may provide assistance with positioning as follows: According to each resident’s needs, preference and care plan, we provide assistance with positioning from cueing and monitoring to a one or two person assist. We reposition every 2-3 hours in order to prevent pressure sores. We help complete range of motion exercises to prevent contractures.</p>
6. PERSONAL HYGIENE	<p>If needed, the home may provide assistance with personal hygiene as follows: According to each resident’s needs, preferences and care plan, we provide assistance with personal hygiene from cueing and monitoring to total assistance. We assist with brushing hair, brushing teeth, washing face, providing per-care, shaving, applying deodorant, perfume or any products for hair.</p>
7. DRESSING	<p>If needed, the home may provide assistance with dressing as follows: According to each resident’s needs, preferences and care plan, we provide assistance with dressing from cueing and set-up to total assistance. We will wash all soiled clothes of the resident, help choose outfits and assist with dressing and putting on socks, shoes, and compression socks.</p>

8. BATHING

If needed, the home may provide assistance with bathing as follows: **According to each resident's needs, preferences and care plan, we provide assistance with bathing from cueing and set-up to total assistance. We assist residents with bathing at least one a week (or as needed), unless under hospice care and supervision.**

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

We encourage each resident to maintain as much independence 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:

Good Rest Senior Care will have medication in a locked cabinet and will provide the specific medication(s) to each resident at specific times during the day.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES: **Good Rest Senior Care is contracted with an RN who provided nurse delegation tasks.**

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:

Good Rest Senior Care is contracted with an RN who provided nurse delegation tasks.

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

ALL tasks as permitted under nurse delegation.

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: on call
- Licensed practical nurse, days and times:
- Certified nursing assistant or long term care workers, days and times: 24/7 staffing
- Awake staff at night
- Other: **Awake staff at night as needed.**

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:

All backgrounds and languages are welcome and accepted.

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:

36 months of private pay before applying for Medicaid.

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:

Includes but is not limited to music, fitness/exercises, movies, books, puzzles, games, gardening, birthday celebrations and holiday parties.

ADDITIONAL COMMENTS REGARDING ACTIVITIES: Additional activities available per resident request and desire.

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