Washington State Department of Social & Health Services
Transforming lives

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER	LICENSE NUMBER
Mona's Care Home LLC /**Milan Thapa**	757211

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.

Table of Contents

About the Home

Personal Care

Medication Services

Skilled Nursing Services and Nursing Delegation

Specialty Care Designations

Staffing

Cultural or Language Access

Medicaid

Activities

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

Mona's Care Home LLC is located at 10822 SE 235th st Kent, WA 98031 with a wide spacious front and backyard. This Adult Family Home is 3 bedrooms with 1.5 bathrooms. Home provides personalized care in a family environment. This Home Provider has a more than Five years experienced with hospice/end of life care, stroke, oxygen, Hoyer lifts, Foley catheter, ostomy care, peg tube, tracheostomy tube, Multiple sclerosis, Parkinson, Dementia etc...

2. INITIAL LICENSING DATE	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4/15/24	**N/A**

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

N/A

5. OWNERSHIP

LLC

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:

- Promoting and supervising those who are able to feed themselves but are risk for choking.
- Physical assistance with feeding those who are unable to fed themselves.
- Puree diet/soft diet.

2. TOILETING

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

- Encouraging, Promoting and supervising who are able to use toilet.
- Provide complete physical assistance who are unable to go toilet or are incontinent.

3. WALKING

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

- Encourage and supervise who are able to walk with assistive device.
- Provide passive range of motion exercise who are unable to walk.

4. TRANSFERRING

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

- Encourage those who are able to transfer on their own.
- Provide physical assistance if needed to transfer.
- Use of Hoyer lifts who are unable to assist with transferring.

5. POSITIONING

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

- Encourage to change position who are able to change position.
- Provide physical assistance with positioning, regular turning and placing limbs in correct position.

6. PERSONAL HYGIENE

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

Encourage and supervise those who are able to maintain personal hygiene.

Provide physical assistance with personal hygiene those who are unable to maintain their hygiene like brushing teeth, combing, showering, and nail cutting (except diabetic client).

7. DRESSING

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

- Encourage those who are able to dress themselves.
- Provide physical assistance for those who are unable to dress on their own.

8. BATHING

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

- Provide physical assistance as needed by residents either full or partial help with showering.
- Bed bath can also be given as needed.

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Personal care is provided either in room or bathroom. Namaste Senior Center has to 2 bathrooms for resident to use. Home also provide Barber / Beauty services.

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:

Medication assistance is done under nurse delegation.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES :

The Provider or Caregiver will assist the Resident with their medications, if needed. If a Resident is unable to administer His / Her own medications, is unaware that they are taking medications due to confusion, or is unable to determine when they need a specific medications (medication – as needed), Nurse delegation will be required in order for the Caregiver to administer the medication to the Resident. Under Washington law, a RN determines that the Resident is in a predictable and stable condition and receives the consent from Resident / Representative to delegate the Nursing task. The Resident's Family / Representative may also administer medications to the Resident.

All the medication will be kept in locked storage and logged onto Resident's records when taken. If the Resident does not needed assistance with medication administration, a lockable container will be provided to secure the medication in the Resident's room.

Medication should be brought to the Facility by the Resident, the responsible party or delivered by the pharmacy and billed directly to the Resident or responsible party. All the medications including Vitamins or other food supplements must be approved in writing by a Physician and be included in the Resident's medication log. A cognitively alert Resident may take an over-the-counter medication without a Physician's order but it is the Policy of the Adult Family Home to notify the Physician when this occurs. If a Resident refuses a medication, the Physician will also be notified.

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:

Registered Nurse or Licensed Practical Nurses available only on a contracted basis as provided by through DSHS..

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

Finger Sticks, Diabetic, Insulin, Blood Pressure check.

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.

The normal staffing levels for the home are:

Registered nurse, days and times: As required.

Licensed practical nurse, days and times: As required

Certified nursing assistant or long term care workers, days and times: 12hrs.

Awake staff at night : only if needed at additional cost

Other:

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:

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 accepts Medicaid payments.

Home also accept Private residents who become eligible for Medicaid After admission.

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:

Home will be providing activities that are meaningful to the Resident His / Her quality of life and interest. The home attempt to determine what activities the Resident enjoyed throughout His / Her if possible, such as Gardening, Light Exercise and Celebration of Birthday and other holidays.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Mona's care Home LLC Welcomes friends and family members of the Residents to visit and share meals with them when they are visiting. There will be no charge for your meals.

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