Home / Provider:

DSHS WASHINGTON STATE Department of Social and Health Services

Assisted Living Facilities (ALF)

Disclosure of Services Required by RCW 18.20.300

The assisted living facility licensee shall disclose to the residents, the residents' legal representative if any, and if not, the residents' representative if any, and to interested consumers upon request, the scope of care and services offered, using the form developed and provided by the department, in addition to any supplemental information that may be provided by the licensee.

This disclosure form provides initial general information about our assisted living facility and allows you to compare care services of different assisted living facilities. Prior to moving in, you should visit an assisted living facility to ask how they will assist you with your unique needs and preferences.

Assisted living facilities may change the services that are available and the charges for these services, by providing thirty days advance notice to residents. However, an assisted living facility must give you ninety days advance notice of any voluntary decrease in services that would affect your decision as to whether you would want to move to a different location or require you to move out.

Who may live in an assisted living facility?

- No assisted living facility is permitted to provide continuing services to you if you need to have a registered nurse frequently evaluate your condition. However, **if** you require frequent nursing evaluation and we can meet your needs, you may be allowed to remain in the assisted living facility, when:
  - You have a short term illness that is expected to last less than fourteen days, or
  - You are receiving hospice services.
- The assisted living facility may not be able to serve you if you need services beyond those disclosed on this form.

  You may need to move out when we cannot meet your needs and moving out is necessary for your welfare. However, each assisted living facility must attempt to "reasonably accommodate" your needs before it can require you to move out.

  Per chapter 388-78A-2020, **"Reasonable accommodation"** and **"reasonably accommodate"** have the meaning given in federal and state antidiscrimination laws and regulations which include, but are not limited to, the following:

  (1) Reasonable accommodation means that the assisted living facility must:
    (a) Not impose admission criteria that excludes individuals unless the criteria is necessary for the provision of assisted living facility services;
    (b) Make reasonable modification to its policies, practices or procedures if the modifications are necessary to accommodate the needs of the resident;
    (c) Provide additional aids and services to the resident.

  (2) Reasonable accommodations are not required if:
    (a) The resident or individual applying for admission presents a significant risk to the health or safety of others that cannot be eliminated by the reasonable accommodation;
    (b) The reasonable accommodations would fundamentally alter the nature of the services provided by the assisted living facility; or
    (c) The reasonable accommodations would cause an undue burden, meaning a significant financial or administrative burden.

Notification of increased service which requires a 30-day notice, is waived in the event a resident has an unanticipated, unplanned, and substantial condition that requires an immediate change in care services that cannot meet the 30-day notification requirement under RCW 70.129.030(4).

Home / Provider:

1. Services / Care

All assisted living facilities must provide the care and services listed below, according to what you have agreed to in your negotiated service agreement.

A. **Activities**: All assisted living facilities must help you arrange social, recreational, religious or other activities in the assisted living facility and in the community. Washington State law, RCW 70.129.030(4), requires the assisted living facility to inform each individual, or their representative, in writing, of the services, items and activities customarily available in the facility or arranged for by the facility as permitted by the facility's license. Contact the assisted living facility for this information if not already provided.

- Additional activities / comments:

B. **Food and Diets**: All assisted living facilities must provide three meals per day, nutritious snacks, and prescribed general low sodium diets, general diabetic diets, and mechanical soft diets. Additionally, we are not required but have chosen to provide the following diets:

Yes	No		
☐	☐	1.	Calorie controlled diets for people with diabetes
☐	☐	2.	Puree diets
☐	☐	3.	Additional dietary services or comments:

C. **Arranging Health Care Appointments**: All assisted living facilities must help you arrange health care appointments and remind you of them, as necessary.

- Additionally, the facility will provide the following optional services (or clarifying comments):

D. **Coordinating Health Care Services**: All assisted living facilities must coordinate services you receive from health care providers in the community with the services the assisted living facility provides to you, if you agree.

- Additionally, the facility will provide the following optional services (or clarifying comments):

E. **Laundry**: All assisted living facilities must provide laundry services to keep your clothes clean and in good repair, and provide you with or ensure your towels, washcloths, and bed linens are laundered at least once per week.

- Additionally, the facility will provide the following optional services (or clarifying comments):

Home / Provider:

F. **Housekeeping**: All assisted living facilities must maintain your living quarters and other areas you may use in a safe, clean, and comfortable condition.
- Additionally, the facility will provide the following optional services (or clarifying comments):

2. Assistance with Daily Tasks

Assisted living facilities are not required to provide assistance with activities of daily living (ADLs). If an assisted living facility chooses to provide assistance with ADLs, it must provide at least the minimum level of assistance described following each ADL listed below, consistent with your preference and with reasonable accommodation law.

Yes No

☐ ☐ The facility will provide assistance with ADLs.

A. **Bathing**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind you to wash and dry all areas of your body; provide stand-by assistance getting into and out of the tub/shower; and steady you as you bathe.

Additionally, the facility will provide the following optional services:

Yes No

☐ ☐ 1. Physical assistance getting into / out of the bathtub or shower.
☐ ☐ 2. Help washing areas that may be hard for you to reach, such as your back or feet.
☐ ☐ 3. Total bathing assistance if you cannot bathe yourself.
☐ ☐ 4. Bed baths.
☐ ☐ 5. Special equipment, assistance, or devices to help transferring into or out of showers or bathtubs.
☐ ☐ 6. Other bathing services (specify) or comments:

B. **Toileting**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind you of necessary toileting activities; provide stand-by assistance while you perform them; and steady you as you use the toilet or adjust your clothing. **Note:** assisted living facilities are not required to provide incontinence products but may assist you in ordering.

Additionally, the facility will provide the following optional services:

Yes No

☐ ☐ 1. Physically help you to and from the toilet or bathroom.
☐ ☐ 2. Help you with incontinent products and occasionally help to clean you.
☐ ☐ 3. Provide urinary catheter care (indwelling, external/condom), cleaning and changing bag.
☐ ☐ 4. Provide routine ostomy care, site maintenance and changing bag.
☐ ☐ 5. Provide care for bladder incontinence, including routinely cleaning you as necessary.
☐ ☐ 6. Provide care for bowel incontinence, including routinely cleaning you as necessary.
☐ ☐ 7. Provide other services (specify) or comments:

C. **Transferring**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind or cue you, and occasionally provide stand-by assistance and steady you, while you transfer.

Additionally, the facility will provide the following optional types of services:

Yes	No		
☐	☐	1.	Routinely provide stand-by assistance while you transfer into and out of your bed or wheelchair, or onto and off of a toilet or shower chair.
☐	☐	2.	One-person physical assistance with transferring.
☐	☐	3.	Two-person physical assistance with transferring.
☐	☐	4.	Lifting with mechanical equipment
☐	☐	5.	Other transferring services (specify) or comments:

D. **Personal Hygiene**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind you to comb your hair, brush your teeth, shave, wash your face and hands and apply make-up, and occasionally provide standby assistance and steady you while you perform these activities.

Additionally, the facility will provide the following optional services:

Yes	No		
☐	☐	1.	Set out your personal hygiene and grooming items.
☐	☐	2.	Help you with grooming tasks such as brushing your hair, shaving, applying make-up or filing your nails.
☐	☐	3.	Help you with oral care and brushing your teeth.
☐	☐	4.	Help you wash and dry your face and hands.
☐	☐	5.	Help you wash and dry other parts of your body, as needed.
☐	☐	6.	Other personal hygiene services (specify) or comments:

E. **Eating**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind you to eat and drink, and occasionally help you cut up your food, prepare food and beverages for you, and bring them to you.

Additionally, the facility will provide the following optional services:

Yes	No		
☐	☐	1.	Feed you, if you occasionally need to be fed.
☐	☐	2.	Feed you on a routine basis, if you are unable to feed yourself.
☐	☐	3.	Other assistance with feeding and eating (specify) or comments:

F. **Dressing**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind and cue you to put on, take off, and lay out your clothes and necessary prostheses, when the assistance of a licensed nurse is not required, and occasionally provide stand-by assistance and steadying while you perform these activities.

Additionally, the facility will provide the following optional services:

Yes	No		
☐	☐	1.	Help you put on, take off, and button/buckle/fasten your clothes.
☐	☐	2.	Dress and undress you if you are not able to help with dressing yourself.
☐	☐	3.	Other assistance with dressing (specify) or comments:

G. **Mobility**: If needed, assisted living facilities providing assistance with ADLs must occasionally remind you to move between locations in the assisted living facility and occasionally provide stand-by assistance and steady you as you move about.

Additionally, the facility will provide the following optional services:

Yes	No		
☐	☐	1.	Provide stand-by assistance as you walk or move about the building.
☐	☐	2.	Physically help you walk or move about the building.
☐	☐	3.	Other assistance with mobility (specify) or comments:

3. Intermittent Nursing Services

Assisted living facilities may, but are not required to provide Intermittent Nursing Services

Yes	No		
☐	☐	A.	The facility will provide intermittent nursing services, including:
☐	☐	1.	Diabetic management as specified below:
☐	☐	2.	Non-routine ostomy care.
☐	☐	3.	Administration of health care treatments, as specified below.
☐	☐	4.	Tube feeding.
☐	☐	5.	Other nursing services. Please ask the facility staff if they provide other nursing services you may need, such as care of minor non-infected wounds or preventative skin care.
☐	☐	B.	The facility uses nursing assistants under the delegation of a registered nurse to provide some authorized nursing services.
☐	☐	C.	The facility typically has a registered nurse in the building for _____ days per week totaling _____ hours per week.
☐	☐	D.	The facility typically has a licensed practical nurse in the building for _____ days per week; totaling _____ hours per week.
☐	☐		Additional comments regarding nursing services:

Home / Provider:

4. Help with Medications

All assisted living facilities must assist you, if you want help, with taking your medications. Someone other than a licensed nurse may provide such assistance. Assistance includes reminding you to take your medications, handing to you and/or opening for you the medication container, and putting the medications in your hand.

Yes No

- ☐ ☐ A. We have a licensed nursing staff available to administer directly, or to supervise the administration of the medications listed below:
  - ☐ ☐ 1. Administration of oral and topical medications and eye / ear / nose drops.
    - ☐ ☐ a. We use nursing assistants under the delegation of a registered nurse to administer drops and oral and topical medications.
- ☐ ☐ B. Administration of injections, excluding insulin.
- ☐ ☐ C. Administration of insulin injections.
- ☐ ☐ D. Additional Comments:

5. Family Assistance with Medications Service

Yes No

☐ ☐ We permit family members to provide medication services to residents under the following conditions:

6. Resident Arranged Services

We allow residents to independently arrange for outside services under the following conditions:

7. Care for Residents with Dementia, Developmental Disabilities, or Mental Illness

Assisted living facilities that choose to serve residents with dementia, developmental disabilities, or mental health issues must provide their staff with specialized training in these areas.

The facility will serve persons with the following needs:

Yes No

- ☐ ☐ Dementia
- ☐ ☐ Developmental Disabilities
- ☐ ☐ Mental Health
- ☐ ☐ Memory Care in a certified facility or unit
- ☐ ☐ Other (specify):

Home / Provider:

8. Transportation Services

Assisted living facilities are not required to provide or help with transportation.

The facility will provide the following optional services:

Yes	No		
☐	☐	A.	Provide transportation to medical appointments:
☐	☐	1.	With staff escorts.
☐	☐	2.	Without staff escorts.
☐	☐	B.	Help arrange transportation to medical appointments.
☐	☐	C.	Comments, limitations or details regarding transportation services:

9. Ancillary Services

The facility will have available either directly or by contract, the following additional ancillary services:

Yes	No		
☐	☐	A.	Social work services.
☐	☐	B.	Religious or spiritual support services.
☐	☐	C.	Other (specify) or comments:

10. Services Related to Smoking

The facility:

Yes	No		
☐	☐	A.	Maintains a smoke-free community.
☐	☐	B.	Will permit smoking in designated outside areas consistent with Initiative 901 as specified in the resident's negotiated service agreement

11. Services Related to Pets

Pets allowed by the assisted living facility must have regular veterinarian examinations and immunizations, appropriate for the species, and must be free of diseases transmittable to humans.

The facility:

- ☐ A. Does not permit pets.
- ☐ B. Permit you to have pets under the following conditions.

12. Services Related to End-Of-Life Care

- ☐ The facility will support any advanced directives you may have or choices you may make regarding end-of-life decisions.
- ☐ The facility may not support all your advanced directives (explain):

13. Payments

Washington State law, RCW 70.129.030(4), requires the assisted living facility to inform each individual, or their representative, in writing, of the charges for services, items and activities customarily available in the facility or arranged for by the facility including charges for services, items, and activities not covered by the facility's basic per diem rate. Contact the assisted living facility for this information if not already provided.

It is important to note that because each assisted living facility structures its pricing differently, there may be additional charges associated with any service the assisted living facility provides or makes available.

Home / Provider:

14. "Bed Hold" Services

If you are a Medicaid resident and you need to be in a hospital, nursing home, or other rehabilitation facility or are otherwise away from our facility, we will hold your bed for you if you are likely to return to the facility and are eligible for a Medicaid covered bed hold for a period of up to 20 days:

If you are a private pay resident, the facility may choose whether or not to hold your bed during an absence.

15. Medicaid Support

The facility:

- ☐ A. Does not accept Medicaid as a source of payment.
- ☐ B. Will accept Medicaid payments for any resident.
  The facility has the following Medicaid contracts:
  - ☐ Assisted Living Services (ALS)
  - ☐ Adult Residential Care (ARC)
  - ☐ Enhanced Adult Residential Care (EARC)
- ☐ C. Will accept Medicaid payments only under the following conditions:

16. Fire Protection Services

The facility will have the following:

- ☐ A. Fire sprinklers throughout, in all resident and non-resident areas.
- ☐ B. Fire sprinklers in some, but not all areas (explain):
- ☐ C. No fire sprinklers.

17. Security Services

The facility will have the following security service to help protect residents with cognitive impairments and wandering behaviors:

Check applicable response:

- ☐ A. Restricted use of exit doors in a designated portion of the building designed to serve residents with dementia.
- ☐ B. Restricted use of exit doors throughout the building.
- ☐ C. Outside area available with restricted egress.
- ☐ D. Other protective features (explain):

Home / Provider:

18. Scope of Licensed Services

This facility:

- ☐ Currently has an assisted living facility license for all resident rooms in the building.
- ☐ Does not currently have an assisted living facility license for all resident / tenant rooms in this building.
  - ☐ The room you will reside in is a licensed room that meets all licensing requirements.
  - ☐ The room you will reside in meets all contracted residential care services regulations.
  - ☐ The room you will reside in has exemptions to the room building requirements which include (explain approved exemption):

The number of residents receiving assisted living services cannot exceed the number of licensed beds.

- ☐ Oxygen services provided by the facility as follows (explain):

- ☐ Hearing aid assistance consisting of (explain):

For More Information

CONTACT		
TELEPHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS
WEB SITE		

For more information about -assisted living facilities in general, you may visit Aging and Long-Term Support Administration on the Internet at: https://www.dshs.wa.gov/altsa/residential-care-services/information-assisted-living-facility-professionals

The assisted living facility licensing rule is Washington Administrative Code 388-78A, and may be found on the Internet at: https://apps.leg.wa.gov/WAC/default.aspx?cite=388-78A

The assisted living facility resident' rights law is Revised Code of Washington 70.129, and may be found on the internet at: https://app.leg.wa.gov/rcw/default.aspx?cite=70.129