

Cathy Cooper
Authorized Signature

Number: SPD-AR-10-088
Issue Date: 10/4/2010

Topic: Developmental Disabilities

Due Date:

Subject: Health Care Representative Trainings

Applies to (check all that apply):

- | | | | |
|-------------------------------------|-------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | All DHS employees | <input type="checkbox"/> | County Mental Health Directors |
| <input type="checkbox"/> | Area Agencies on Aging | <input type="checkbox"/> | Health Services |
| <input type="checkbox"/> | Children, Adults and Families | <input type="checkbox"/> | Seniors and People with Disabilities |
| <input checked="" type="checkbox"/> | County DD Program Managers | <input checked="" type="checkbox"/> | Other (please specify): DD Service Coordinators, DD 24 hr Residential Providers |

Action Required: Register using the attached form for Health Care Representative Trainings

Reason for Action: This is for Health Care Representative rule training. The training is required prior to teams appointing a Health Care Representative.

Due to budget cuts, there are limited trainings currently scheduled. Additional trainings may be scheduled at a later date.

For those in Southern Oregon, there will be trainings scheduled by the region. Notification will occur separately.

We have scheduled various locations throughout the state for your convenience. We have included a registration form that can be e-mailed or faxed.

The trainings are limited to those in the developmental disability service system. Most counties and service providers find it helpful to have Service Coordinators, 24-Hour Residential Services, Supported Living and Adult Foster Home providers attend the training. Please distribute this IM to your service coordinators and provider agencies who need this information. For those areas, providers, etc where there is a critical need, please register early.

For instructions on how to register see attached. Please contact Jane Patterson at the number listed below for questions.

Please remind staff that if they register and cannot attend, they must cancel.
Registration is limited and once that number is reached you will be placed on a waiting list for future classes.

Field/Stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s):	Jane Patterson		
Phone:	503-945-6862	Fax:	(503) 945-5905
E-mail:	Jane.Patterson@state.or.us		

HCR Training Dates and Locations

Trainings will be held at:

Marion County

October 13th 1:00 – 4:30

October 14th 1:00 – 4:30

November 15th 1:00 – 4:30

DHS Learning Center;

3414 Cherry Ave, Keizer 97303

Fort Rock Room # 118

Mt. Mazama Room # 126

Fort Rock Room #118

Multnomah County

October 21st 1:00 – 4:30

November 30th 8:30 – 12:30

Legacy Meridian Park Hospital

19300 SW 65th Ave, Tualatin,
Cascade Building, Cascade Room
Same location as above

Umatilla County

October 28th 10:00 – 2:00

Umatilla CDDP - Training Room

2525 Westgate, Suite 1
Pendleton, Oregon

Lane County

November 18th 9:00 – 12:30

Carmichael Training Room

Serbu Juvenile Justice Center
2727 Martin Luther King Jr. Blvd.
Eugene, OR 97401
Across from Autzen Stadium

Health Care Representative Trainings Registration Form

(Form may be used for up to 5 staff from the **same** Agency)

Please Print

Name _____

E-mail _____

(Required)

Agency _____

(Required)

Address _____

(1 address for all Required)

City/State/Zip _____

(Required)

Daytime Phone Number () _____

(Required)

Class Wanted (City) & Date _____

Registration is first come, first served. Classes are limited to 25 individuals.

If you are unable to attend, please call Jane Patterson at (503) 945-6862 or Janet Brattin at (503) 947-5099 to cancel.

Send your registration form using one of the following options:

Fax: (503) 945-5905

Email to: Jane.Patterson@state.or.us or Janet.I.Brattin@state.or.us

or Mail to: DHS/SPD/ Attn: Jane Patterson: ReBAR

500 Summer St. NE, E #09

Salem, OR 97301