

Mike McCormick

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**Number:** APD-AR-15-029

**Issue date:** 4/29/2015

**Topic:** Licensing

**Due date:** Immediately

**Subject:** Referral information for Bureau of Labor and Industries (BOLI)

**Applies to (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> All DHS employees                             | <input type="checkbox"/> County Mental Health Directors                      |
| <input checked="" type="checkbox"/> Area Agencies on Aging             | <input type="checkbox"/> Health Services                                     |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services(ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs                     | <input type="checkbox"/> ODDS Children's Intensive In Home Services          |
| <input type="checkbox"/> County DD Program Managers                    | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                |
| <input type="checkbox"/> ODDS Children's Residential Services          | <input type="checkbox"/> Other ( <i>please specify</i> ):                    |
| <input type="checkbox"/> Child Welfare Programs                        |  |

**Action required:**

Adult Foster Home providers may have questions regarding new Federal laws and State (BOLI) regulations. APD/AAA staff should NOT attempt to answer these questions. Providers with questions or concerns regarding Federal Laws or State (BOLI) regulations should be referred to the Oregon Office of Bureau of Labor website at <http://www.oregon.gov/BOLI/Pages/index.aspx> BOLI also has a direct email address [maib@boli.state.or.us](mailto:maib@boli.state.or.us) and phone number (971) 673-0761 which can be given to the public. The questions BOLI receives will be reviewed and directed to the correct BOLI department and/or representative APD/AAA staff can also direct the provider to consult with his/her own attorney.

**Reason for action:**

**APD/AAA employees should NOT provide any counseling or suggestions related to employment practices or laws, as this is not in the purview of the department.**

**Field/stakeholder review:**     Yes     No

**If yes, reviewed by:** APD Operations Committee

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

<b>Contact(s):</b>	Marsha Ellis		
<b>Phone:</b>	503-945-6415	<b>Fax:</b>	
<b>Email:</b>	Marsha.M.Ellis@dhsoha.state.or.us		