

**Aging and People with Disabilities**

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**Number: APD-IM-13-018**  
**Issue date: 3/27/2013**

**Topic:** Licensing

**Subject:** Complaint Procedure and Fair Housing Notice

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

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

**Message:** The Adult Foster Home Complaint Procedure Notice, [form SDS 519](#), has been updated, replacing all previous versions, and is now available on the DHS forms server. The notice includes the new Fair Housing Notice with contact information to the Fair Housing Council of Oregon. Please share this updated form with Non-Relative AFH licensees. This new version should be posted in all APD AFHs no later than the next renewal visit. A provider alert will also be issued notifying licensees of this updated form.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Connie Rush, AFH Program Coordinator		
<b>Phone:</b>	503-947-5163	<b>Fax:</b>	503-378-8966
<b>Email:</b>	<a href="mailto:connie.l.rush@state.or.us">connie.l.rush@state.or.us</a>		