

## Aging and People with Disabilities

Donna Keddy  
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**Number:** APD-IM-13-020  
**Issue date:** 4/11/2013

**Topic:** Licensing

**Subject:** Mandatory Form: Monitoring Device Notice

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

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

**Message:** The Monitoring Device Notice (SDS 0906N) is a 5 ½ x 8 ½ inch form printed on colored card stock paper. This is a mandatory form that must be posted in a conspicuous location in all commercial APD adult foster homes. [OAR 411-050-0444 (6)(b)(I)]

Licensors – please ensure this form has been made available to the adult foster homes in your licensing office’s jurisdiction. If you require additional Monitoring Device Notice forms, the forms coordinator in your office may order it through the Field Branch Ordering System (FBOS). Please limit your orders to no more than the number of forms needed in a six to twelve-month period.

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

<b>Contact(s):</b>	Sylvia Rieger		
<b>Phone:</b>	503-945-6403	<b>Fax:</b>	503-378-8966
<b>Email:</b>	<a href="mailto:Sylvia.A.Rieger@state.or.us">Sylvia.A.Rieger@state.or.us</a>		