

Donna Keddy

Authorized Signature

Number: APD-PT-14-034
Issue Date: 9/19/2014

Topic: Licensing

Transmitting (check the box that best applies):

- New policy
 Policy change
 Policy clarification
 Executive letter
 Administrative Rule
 Manual update
 Other: _____

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"/> Children, Adults and Families | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> County DD Program Managers | |

Policy/rule title:	Requesting Corrective Action for APD adult foster homes		
Policy/rule number(s):		Release no:	
Effective date:	Immediately	Expiration:	
References:			
Web Address:			

Discussion/interpretation: The Office of Licensing and Regulatory Oversight (OLRO), Adult Foster Home (AFH) Unit, is moving to a “centralized intake” process for corrective action requests.

AFH Licensors: Submit **all** requests for corrective action electronically to this central intake mailbox: CA.Requests@dhsola.state.or.us. The corrective action request includes the completed SDS 517C and supporting documentation. Once your request is submitted, our “Intake Coordinator” will assign the cases to one of the Corrective Action Coordinators in rotation. You will receive an e-mail from the Corrective Action Coordinator who will be handling your request, and from that point forward, you may communicate directly with that Coordinator about that request.

This mailbox is to be used exclusively for corrective action requests by local AFH Licensors. Licensors are encouraged to add this e-mail address to their address books.

Implementation/transition instructions: Implement immediately

Training/communication plan: Instructions provided by e-mail and DHS Policy Transmittal.

Local/branch action required: APD AFH Licensors will submit all requests for corrective action to the mailbox indicated in this policy:
CA.Requests@dhsosha.state.or.us.

Central office action required: OLRO, AFH Unit will provide technical assistance if needed.

Field/stakeholder review: Yes No

If yes, reviewed by: Operations Committee

Filing Instructions:

If you have any questions about this policy, contact:

Contact(s):	Sylvia Rieger		
Phone:	503-373-2133	Fax:	503-373-2228
E-mail:	Sylvia.A.Rieger@state.or.us		