

Notice issued to: (first and last name) _____

Date issued: _____ Date of proposed move-out: _____

Name of facility: _____	
Type of facility:	<input type="checkbox"/> RCF <input type="checkbox"/> ALF <input type="checkbox"/> MCC
Address: _____	
City/state/ZIP: _____	
Telephone: _____	FAX: _____

This move-out notice is being issued for:

- A. Medical/psychiatric care:** You have left the facility to receive urgent medical or psychiatric care. You have been evaluated by an appropriate staff person from the facility. The facility has determined your current health or service needs cannot be met by the facility. See description below. You have the right to an administrative hearing. If you request an administrative hearing, the facility must hold your room and may charge room and board pending resolution of the hearing.

The specific needs that cannot be met are:

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- B. Health and safety reasons:** The facility has determined that your health and safety, or the health and safety of other residents, is in jeopardy and undue delay in moving would increase the risk of harm to yourself and others, as indicated in the description below. You have the right to an administrative hearing. If you request an administrative hearing, the facility must hold your room without charging for room and board or services pending resolution of the hearing. **(FACILITY NOTE: Your Salem Central Office Policy Analyst must be contacted prior to giving this notice to a resident that is still in the facility.)**

The specific health and safety concerns are:

If you object to this move based on the reasons stated in this notice:

You have **five (5)** working days to request an administrative hearing after receipt of this notice by completing the attached Hearing Request Form (DHS 0443).

- SPD may hold an informal meeting to resolve this matter. If you are satisfied with the outcome of this meeting then no administrative hearing will be held
- Hearings are held before an administrative law judge who works for the Office of Administrative Hearings.
- You can have a lawyer or someone else help you if a hearing is held. You may be able to obtain free legal services through the local legal aid office or the bar association.

If you are having difficulty understanding this notice, your rights, or if you need an advocate, the Long-Term Care Ombudsman Office can help you. You can contact them at:

Office of the Long-Term Care Ombudsman
3855 Wolverine NE, Suite 6
Salem, OR 97305-1251
Telephone: 1-800-522-2602 or TTY: 1-503-378-5834

Copies of this notice have also been issued to the following people and agencies:

Name and relationship:

Address and phone number:

_____	_____
_____	_____
_____	_____

Signature and title of facility representative

Date

This notice is being issued pursuant to Oregon Administrative Rule 411-054-0080(6)(a-c)

Copy of this notice must be faxed to SPD Central Office at 503-378-8966, and to the Long-Term Care Ombudsman Office at 503-373-0852 on the same day it is delivered to the resident.