Topic: Developmental Disabilities

Subject: New Forms- Notice of Exit, Transfer, Suspension, or Reduction

Applies to (check all that apply):

- All DHS employees
- Area Agencies on Aging: {Select type}
- Aging and People with Disabilities
- Self Sufficiency Programs
- County DD program managers
- Support Service Brokerage Directors
- ODDS Children’s Residential Services
- Child Welfare Programs
- County Mental Health Directors
- Health Services
- Office of Developmental Disabilities Services (ODDS)
- ODDS Children’s Intensive In Home Services
- Stabilization and Crisis Unit (SACU)
- Other (please specify): DD Service Providers, including Residential Service Settings (Foster Homes, 24-Hour Residential Program Settings, Host Homes), Supported Living, Community Living Supports, Day Support Activities, and Employment Services; Provider Organizations, including ORA, CPAO, and SEIU

Action required: Effective immediately service providers are to use the new Notice of Exit forms specific to service or setting type.

ODDS has updated the Notice of Exit, Transfer, Reduction, or Suspension form (DHS 0719) by creating three versions of the Notice form. These forms are to be used whenever a provider is giving notice to an individual of an involuntary exit, suspension, transfer, or reduction of services.

The new Notice forms can be found on the DHS forms server at: [https://aix-xweb1p.state.or.us/es_xweb/FORMS/](https://aix-xweb1p.state.or.us/es_xweb/FORMS/)

The new Notice forms are:
Residential Services Settings - Form DHS 0719R:

This form is to be used whenever a provider is giving a notice of exit or transfer to an individual residing in a(n):

- Adult Foster Home
- Child Foster Home
- 24-Hour Residential Program Setting
- Host Home

A provider must give notice to an individual any time a provider is requesting that an
individual move from the home and the individual (or their guardian) does not agree with the move. Notice is required for an involuntary move, even when the individual is moving to another setting operated by the same provider.

Due to the nature of the residential settings which combine housing and services together, a notice is required any time there is a request for the individual to move (when the individual is not in agreement with the move out), regardless of timing.

**Community Living and Supported Living Services - Form DHS 0719C:**

![Notice of Exit, Suspension, or Reduction-ODDS](image)

This form is to be used whenever a provider is giving a notice of exit, suspension, or reduction of service to an individual receiving:

- Community Living Supports
- Supported Living Services

A provider must give notice to the individual whenever the individual’s services from the provider are reduced, suspended, or terminated during the authorized service period reflected in the individual’s ISP or Service Agreement, and the individual (or their guardian) does not agree with the reduction, suspension, or termination (exit).

*Please note:* When a provider of Supported Living services who is also the individual’s landlord chooses to exit a person from services, this is separate from a move out notice. The housing entity must separately issue eviction notification and follow all applicable landlord tenant laws for an individual to be involuntarily moved from their housing.
Day Support Activities and Employment Services – Form DHS 0719E:

Notice of Exit, Suspension, Transfer, or Reduction-
ODDS Day Support Activities and Employment Services

Date: ____________ Name: ____________________________
Address: _______________________________________

You are being provided with a notice from ___________________________ that you are being:

☐ Exited  ☐ Transferred  ☐ Suspended  ☐ Reduced as follows: ___________________________

(DD service provider)

From the following services(s):

(Employment Services – OAR 411-345-0140; Day Support Activities – OAR 411-450-0040)

☐ Job Coaching  ☐ Employment Small Group  ☐ Employment Discovery
☐ Employment Path – Community  ☐ Employment Path – Facility
☐ Day Support Activities – Community  ☐ Day Support Activities – Facility

This form is to be used whenever a provider is giving a notice of exit, suspension, transfer, or reduction of service to an individual receiving:

- Day Support Activities
- Employment Services

A provider must give notice to the individual whenever the individual’s services from the provider are reduced, transferred, suspended, or terminated during the authorized service period reflected in the individual’s ISP or Service Agreement, and the individual (or their guardian) does not agree with the reduction, transfer, suspension, or termination (exit).

Reason for action: ODDS has adopted the new forms to reflect Oregon Administrative Rule (OAR) language and standards.

Resources: For additional information related to standards in Oregon Administrative Rules, reference the following:

24-Hour Residential Program Settings- OAR 411-325-0390
Adult Foster Homes- OAR 411-360-0190
Child Foster Homes- OAR 411-346-0240
Community Living Supports- OAR 411-450-0040
Day Support Activities- OAR 411-450-0040
Employment Services- OAR 411-345-0140
Host Homes- OAR 411-348-0390
Field/stakeholder review:  □ Yes  ☒ No
If yes, reviewed by:  n/a

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

<table>
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<th>Contact(s): Rose Herrera</th>
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