Information Memorandum Transmittal Aging and People with Disabilities

Specialist Survey



Bob Davis	<u>Number</u> : APD-IM-21-104
Authorized signature	Issue date: 11/12/2021
Topic: Other	Due date:
<u>Subject</u> : Provider Time Capture (PTC) - Stat	ewide Survey Distribution
Applies to (check all that apply):	
 ☐ All DHS employees ☑ Area Agencies on Aging: Types A and B ☑ 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):
Message:	
Hello PTC users,	
The PTC Team has released surveys for staf These surveys will help us evaluate how the s PTC Team can better support all OR PTC DC	statewide rollout is going and how the
Staff are encouraged to take 2 surveys:	
Staff EVV Survey, and	
Either the PTC Voucher Specialist Surve	ey or the PTC Non-Voucher

<u>Voucher Specialist Survey</u>: intended for staff who typically spend a significant amount of time entering HCW time into DHR/Mainframe

Non-Voucher Specialist Survey: intended for all other staff impacted by OR PTC DCI

(Case Managers, supervisors, HCW Coordinators, etc.)

Paper surveys are being mailed to a sample group of consumers and providers. If you receive a completed paper survey from a consumer or provider, please scan and email the survey to PTC.Support@dhsoha.state.or.us.

We also have electronic surveys available in several languages. Please feel free to share survey links with any consumers or providers who may be interested in providing feedback to the PTC Project. Links will also be posted to PTC.Oregon.gov.

Survey links:

Provider Survey (English)	Consumer Survey (English)
Provider Survey (Simplified	Consumer Survey (Simplified
Chinese)	Chinese)
Provider Survey (Russian)	Consumer Survey (Russian)
Provider Survey (Somali)	Consumer Survey (Somali)
Provider Survey (Spanish)	Consumer Survey (Spanish)
Provider Survey (Vietnamese)	Consumer Survey (Vietnamese)

For more information on the PTC Project, please visit PTC.Oregon.gov.

If you have any questions about this information, contact:

Contact(s): Provider Time Capture	
Phone:	Fax:
Email: PTC.Support@dhsoha.state.or.us	