

DD Adult Foster Home Forms on the DHS/OHA Publications and Forms webpage

<http://www.dhs.state.or.us/admin/forms/>

Use the form numbers provided below to locate the forms listed. Note that the state forms website is used for many different types of programs that all use different Oregon Administrative Rules. The forms listed below are for use specifically in DD foster homes.

If you come across other forms on this website be sure to confirm that they meet your OARs before using them!

| | AFH FORM NAME | FORM # | REV. DATE |
|--|---|---|--------------|
| Application Related Forms: | <i>License Application</i> | <i>SDS 0654</i> | <i>12/12</i> |
| | <i>Application Instruction Sheet</i> | <i>SDS 0654i</i> | <i>12/12</i> |
| | <i>Foster Home Medicaid Provider Enrollment Agreement (PEA)</i> | <i>SDS 0378</i> | <i>4/14</i> |
| | <i>Plan of Daily Operation</i> | <i>SDS 0656</i> | <i>12/12</i> |
| | <i>Consent for Release of Information</i> | <i>SDS 4533A</i> | <i>5/11</i> |
| | <i>Health History & Physician/Nurse Practitioner's Statement</i> | <i>SDS 0903</i> | <i>2/14</i> |
| | <i>AFH Financial Information</i> | <i>SDS 0448A</i> | <i>8/13</i> |
| | <i>Resident Manager Application</i> | <i>SDS 0655</i> | <i>12/12</i> |
| | <i>Plan of Coverage for Resident Manager Absence</i> | <i>SDS 0656A</i> | <i>12/12</i> |
| | <i>Plan for Operating More than One Foster Home</i> | <i>SDS 0656B</i> | <i>12/12</i> |
| | <i>2B Classification Application</i> | <i>SDS 0680</i> | <i>3/13</i> |
| | <i>2B Classification Renewal Application</i> | <i>SDS 0681</i> | <i>3/13</i> |
| | | <i>Applicant list of references, Floor Plan Guidelines required for new applicants are available from licensor (not yet on website)</i> | |
| Capacity Change Request: | <i>Change of Capacity for AFH-DD</i> | <i>SDS 0669</i> | <i>3/13</i> |
| Complaints: | <i>Adult Foster Home Provider Complaint Form (for provider use)</i> | <i>MSC 0944</i> | <i>4/13</i> |
| | <i>DD Services Complaint Form (for consumer use)</i> | <i>SDS 0946</i> | <i>5/09</i> |
| Medication Administrative Record (MAR): | <i>Medication Administration Record (2-sided, with PRN documentation on back)</i> | <i>SDS 0812A</i> | <i>1/05</i> |
| Notification of Exit: | <i>DD Mandatory Written Notice of Exit or Transfer</i> | <i>SDS 0719DD</i> | <i>12/14</i> |
| Resident Related Forms: | <i>Individual Support Plan Form</i> | <i>SDS 0427</i> | <i>4/12</i> |
| | <i>Individual Support Plan Change Form</i> | <i>SDS 0427a</i> | <i>5/12</i> |
| | <i>Individual Summary Sheet</i> | <i>SDS 4203</i> | <i>10/10</i> |
| | <i>Individual Emergency Information (required form)</i> | <i>SDS 4204</i> | <i>10/10</i> |
| Training Log: | <i>Caregiver Training Log</i> | <i>SDS 0668</i> | <i>3/13</i> |
| Training Request Forms: | <i>AFH Training Credit Request</i> | <i>SDS 1510</i> | <i>8/14</i> |
| Variances: | <i>Variance Request</i> | <i>DHS 6001</i> | <i>2/14</i> |

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| Licensing Visit Checklists/Reports and Other Forms Used by Licensors: | <i>Licensing Checklist (short version)</i> | <i>SDS 0376</i> | <i>10/10</i> |
| | <i>Licensing Checklist (long version)</i> | <i>SDS 0376A</i> | <i>12/10</i> |
| | <i>AFH-DD Fire Safety Inspection Checklist</i> | <i>SDS 0659</i> | <i>5/06</i> |
| | <i>Checklist for AFH-DD New Provider</i> | <i>SDS 0667</i> | <i>3/13</i> |
| | <i>Checklist for AFH-DD Change in Provider</i> | <i>SDS 0662</i> | <i>3/13</i> |
| | <i>Checklist for AFH-DD Change of Address</i> | <i>SDS 0663</i> | <i>3/13</i> |
| | <i>Checklist for AFH-DD License Renewal</i> | <i>SDS 0665</i> | <i>3/13</i> |
| | <i>Checklist for AFH-DD Classification Level 2B, Level 2M</i> | <i>SDS 0664</i> | <i>3/13</i> |
| | <i>Checklist for AFH-DD Additional Home(s)</i> | <i>SDS 0661</i> | <i>3/13</i> |

Other forms frequently requested (these forms are **NOT** on the state forms website):

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| Emergency Plan Sample Template | Available on the Washington County DD Program Foster Care webpage: http://www.co.washington.or.us/HHS/DevelopmentalDisabilities/FosterCare/index.cfm <i>Click on the "Sample Emergency Plan format" link under the Emergency Preparedness heading at the bottom of the page</i> |
| Mandatory Abuse Reporter Notification Forms and Cards | Available on the state's DHS Publications webpage: http://www.oregon.gov/DHS/spd/pubs/index.shtml <i>Scroll down to the section titled: Office of Investigations and Training Mandatory Abuse Cards and Notices. Click on the card (Mandatory Abuse Reporting for Adults with Developmental Disabilities Card) or notice form (Notice – Mandatory Abuse Reporting Notice for Adults with Developmental Disabilities). The file will download into your browser's download folder which then should be able to be viewed and printed.</i> |
| Fatal Four Protocol Forms | Available on the OTAC (Oregon Technical Assistance Corporation) website: www.otac.org.isp/forms <i>Click on the "Click here to download the 11.18.11 ISP materials" link under the Download Materials heading. You will be prompted to choose between "open" or "save" – you may choose "open" in order to just access the protocols you are interested in.</i> <i>Click on the "11.18.11_ISP_Materials" folder, then the "3 Protocols and Financial Plan" subfolder to access protocols for Aspiration, Constipation, Dehydration, Seizures as well as a blank protocol for general use.</i> |