

SB99 Training

The required SB99 training (Providing Inclusive Care) is free through Oregon Care Partners. [Here is the link to the training.](#) Here is the [link to an overview of the requirement](#), including the deadline.

Bed Rails

SOQ recently rolled out a [temporary policy on the use of bed rails](#) because the use of bed rails as assistive devices is not outlined in Rule.

For quarter and half bedrails, the policy is to support resident choice for their mobility. The recommended form is not required; however, it is encouraged and a way to start the conversation. SOQ wants to make sure the situation is being monitored so a bed rail that was once used for mobility doesn't become a restraint, which can happen through changes in cognition or physical changes. In that case, there needs to be an IBL in place, which both protects resident rights and is also a provider protection.

Workforce Survey Update

The purpose of the State of the Workforce Survey is to learn more about the workforce as a whole in Oregon. There is a challenge finding caregivers, so the State is looking to address challenges with staff retention and hiring. The State wants to collect data to understand what's happening and to build a plan.

The survey is not mandatory but optional. [Here is a link to the survey.](#) There is no penalty for not completing the survey.

Rate & Wage study

DHS was asked by the Oregon legislature to conduct a wage and rate study to look at a model for AFH payments. There were some responses from providers. DHS is now looking at a pay structure and model and how care needs are being assessed. Burns & Associates (independent contractor) was the firm contracted to do this work. They have posted on their page an opportunity for providers to give feedback on data from this study. [Click here to provide feedback.](#) The State only sees high-level data and not individual provider data.

Feedback is open until Oct. 28th to get additional feedback. Burns & Associates will take the final report and information to the legislature.

Questions from Participants

Note: Questions below are listed as written in the chat box by the person making the submission and have only been edited for clarity.

1. **Question: I have a question regarding bed rails specifically full bed rails for a patient with seizure disorders. I have not seen anything addressing this safety issue for these types of residents.**
 - a. **Answer:** If there are ADL needs that impact mobility, an IBL is the best option.
 - b. For residents on hospice or residents not actively getting out of bed – there is a recognition for individuals who aren't able to get up on their own due to health conditions. In this case, a bed rail isn't by itself necessarily a restraint.
 - c. The policy is focusing on quarter and half rails only - there is an option to use this for mobility.
 - d. The policy doesn't address full rails
 - i. If there is a three-quarter or full rail, this needs an IBL
 - ii. IBLs require resident consent. If they can't consent, there is a process to address this.
 - iii. The IBL requires a doctor's order
 - iv. You do have to follow the IBL process

2. **Question: I am concerned about the incident that occurred in Washington County regarding the FBI arrest and allegation for "indentured servitude". Many of us have caregivers from other countries and have raised concern about this. This was widely shared in the news. Did I miss DHS making a formal statement about this? The providers are concerned about retaliation.**
 - a. **Answer:** SOQ didn't make a formal statement but responded to media requests as they came in. SOQ was made aware of the issue by the FBI. The allegations came from an individual living in the home.
 - b. We would have no reason to look into this issue at other homes.

3. **Question: Secondary exits for multiple level AFHs – do I need to have the collapsible ladder in all bedrooms?**
 - a. **Answer:** Guidance comes from appendix R in Fire Code [[see code](#)].
 - b. This is not required but it is an additional safety option. Permanently attached ladders cannot be used as a primary means of escape.

4. **Question: What can be done about the long wait for new AFH owners to apply for a license in Clackamas County?**

- a. **Answer:** It's a fair question, but a complicated question. Washington and Clackamas Counties have been inundated with applications. SOQ suggests looking at other counties. SOQ encourages people to get licensed outside the Portland Metro area.
 - b. Make sure you turn in an application that is complete. The amount of back and forth with incomplete applications takes a long time.
 - c. Understand they're understaffed.
5. **Question: Can other licensors help Clackamas? We have to go where we are already living and can afford the property?**
- a. **Answer:** Other licensors have been helping Clackamas and have come in to help.
6. **Question: There are many homes in Clackamas who have 1-2 vacancies. It seems that there are not enough residents for all homes. Do we need more?**
- a. **Answer:** *Not provided*
7. **Question: Is there a blast being sent out about placement?**
- a. **Answer:** I'm not aware
8. **Question:**
- a. **Answer:** If you're in Mult. Co – there is a 24-month waiting period before opening another home
 - b. In other counties, there isn't a waiting period, but it's important to be ready. It's a big balancing act. SOQ sees when people try to open too many homes too quickly, it becomes a challenge.
 - c. Rule:
 - i. (2) MULTIPLE HOMES. An applicant may not be licensed to operate a second AFH, or any additional home, without first demonstrating a history of substantial compliance for previous and currently licensed AFHs. (a) A separate application is required for each location where an AFH is to be operated. (b) A written plan describing the administrative responsibilities and staffing to cover each home is required. (c) The applicant must complete the Department's application form for the specific type of license requested and submit the application form to the LLA with the non-refundable fee. (d) Applications are not complete until all the required information is submitted to the LLA. Failure to provide complete and accurate information may result in the denial of the application. (e) The applicant may withdraw their application at any time during the application process by written notification to the LLA.

- ii. (f) An applicant whose license has been revoked, non-renewed, voluntarily surrendered during a revocation or non-renewal process, or whose application for licensure has been denied, shall not be granted a new license by the LLA for a period of not less than one year from the date the action was final, or for a longer period if specified in the final order. (g) All moneys collected under ORS 443.725 to 443.825 are paid to the Quality Care Fund.
9. **Question: The City of Beaverton Building Department has recently determined that adult foster homes are considered facilities that would require the homes to be ADA compliant (including the bathroom). Info was sent to Lynette to follow up with the Beaverton Building Department, which she did. The City is sending this up to DCBS who will make an interpretation. This decision could have major ramifications for adult foster homes. Is there any update on the interpretation by DCBS?**
- a. **Answer:** Lynette forwarded the requirements to the City of Beaverton and has not heard follow up yet.
10. **Question: Can we have more CE trainings from the county via ZOOM, I found difficult to attend in person. When doing training via internet it is easier to attend. I would also be easier to attend in the afternoon between 2-4pm. Can we also have some trainings in the first half of the year?**
- a. **Answer:** Lynette can't speak for the counties, but you can reach out to the LLAs about training. At Central Office, they don't have a designated trainer right now.
 - b. When SOQ offers training, they try to offer it at two different times
 - c. At the end of this month, there is a [new evacuation form training](#).
 - d. The AFH orientation is the training they encourage to be in person. You can't replace that connection you get with the LLA when you attend in person.
11. **Question: I saw a blast saying that there are interpreters available to help AFHs. Can anyone tell me how that works?**
- a. **Answer:** Lynette hasn't heard about this.
 - b. An attendee answered: If you have (or request) BSS to be put in place, (request it via the case manager), Behavior Support Services (BSS) can provide in-person education and support in the AFH, to staff, and the provider along with resources. It's a good tool for AFHs.

Question about policy? Email APD.AFHTeam@dhsosha.state.or.us