

Aging and People with Disabilities

Action Request Transmittal

IVIIKE IVIC	Cormick	<u>Number</u> : APD-AR-17-018
Authoriz	zed signature	Issue date: 3/10/2017
Topic:	Other	Due date:
Subject:	Narration for OACCESS Case	es in Estates Administration Unit (8606)
All I Are Agii Self Cou OD Res	to (check all that apply): DHS employees a Agencies on Aging ng and People with Disabilities f Sufficiency Programs unty DD Program Managers DS Children's sidential Services Id 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):

<u>Action required</u>: APD/AAA may authorized 1-3 employees in each office to narrate in OACCESS, if the file has been transferred to Estates Administration Unit (Branch 8606).

Reason for action: Local office staff are unable to narrate archived information in Oregon ACCESS if the file has been transferred to Estates Administration. Offices need the ability to narrate in OACCESS on cases that have been transferred to Estates Administration.

To authorize these rights, management from each office must send an email to Lauren.e.mitchell@state.or.us.

The email should include:

- Staff Name
- Branch number
- Staff RACF
- Manager contact information

Offices will be asked to check the existing list and update quarterly. Managers, not staff, should make the request so access can be granted without a signature.

Field/stakeholder review:		☐ No
If yes, reviewed by:	APD policy	and OPS

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

_	<i></i>	- 		-				
C	Contact(s):	Lauren Mitchell	itchell					
	Phone:	503-945-6479	Fax:	503-373-7823				
	Email:	lauren.e.mitchell@state.or.us						