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## **TITLE 75. ATTORNEY GENERAL**

### **CHAPTER 15. STANDARDS AND CRITERIA FOR DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS**

#### **SUBCHAPTER 1. GENERAL PROVISIONS**

##### **75:15-1-1. Purpose**

This chapter sets forth the rules, including standards and criteria, used in certifying all domestic violence and sexual assault programs and shelters (74 O.S. § 18p-6). The rules regarding factors relating to the certification processes including, but not necessarily limited to, applications, fees, requirements for and administrative sanctions, are found in OAC Title 75, Chapter 1.

##### **75:15-1-1.1. Mission and underlying philosophy**

(a) The mission of the standards and criteria for domestic violence and sexual assault programs is to eliminate domestic violence, sexual assault and stalking in the State of Oklahoma.  
(b) The philosophy underlying the standards and criteria for domestic violence, **and** sexual assault ~~and batterers intervention~~ programs is that:

- (1) All persons have the right to live without fear, abuse, oppression and violence;
- (2) There should be equality in relationships and survivors of domestic violence, sexual assault and stalking should be helped to assume power over their own lives;
- (3) No one deserves to be victimized by assaultive or abusive behavior;
- (4) Survivors should be treated with dignity and respect;
- (5) All people involved in violent crimes are affected—victims, children, families, partners, friends, the community, and perpetrators;
- (6) Offending is a choice, and perpetrators of domestic violence, sexual assault and stalking are solely responsible for their behavior;
- (7) These perpetrators must be held accountable for their behavior, **and**
- (8) A coordinated community response is the best approach to eliminating domestic violence, sexual assault and stalking in Oklahoma, **and**

(9) Safety for the victims/survivors and their dependants is the primary focus of intervention and services.

#### **75:15-1-2. Definitions**

The following words or terms, when used in this chapter, shall have the defined meaning, unless the context clearly indicates otherwise:

**"Admission"** means to accept a client for services or treatment.

**"Advocacy"** means the assistance provided which supports, supplements, intervenes and/or links the client with the appropriate service components. This can include medical, dental, financial, employment, legal and housing assistance.

**"Advocate"** means a person, providing support to ensure clients receive appropriate services.

**"Assessment"** means an appropriate course of assistance based on a face-to-face formal screening.

**"Batterer"** means a person, male or female, who perpetrates domestic violence, stalking or other harassment against present or past intimate partners, another adult, emancipated minor or minor child, who are family or household members or who are or were in a dating relationship.

**"Batterers intervention"** means services provided to batterers, or perpetrators of domestic violence that hold a batterer accountable for his or her abusive behavior, provide consequences for engaging in violent or abusive behavior, provide monitoring of batterer's behavior, and require him or her to change his or her behavior and attitudes and are also protective of the victim(s). Anger control or management, substance abuse treatment or mental health treatment alone or in combination with each other shall not constitute batterers intervention; neither may these interventions alone nor in combination with each other be utilized as the primary means of facilitating the required changes in behavior and attitudes.

**"Business day"** shall mean a calendar day other than a Saturday, Sunday, or state holiday. In computing any period of time where the last day would fall on a Saturday, Sunday, or state holiday, the period shall run until 5:00 o'clock p.m. of the next business day.

**"Case consultation"** means review of a client's case by the primary service provider and other program personnel, consultants or both.

**"Case management"** means the process of supporting and helping victims/survivors and their dependents as they cope with and overcome the effects of domestic violence, sexual assault and stalking. Actions may include activities such as 1)developing, reviewing, and updating the service plan that is designed to solve specific problems in the current life

situation; 2) supporting adult/child survivor's skills in making their desired life changes through activities such as introducing new skills, modifying previous ways of coping with their situation and linking to resources to address immediate needs and secondary issues, and/or 3) exit planning as part of the individual supportive services. The service provider must be a Certified Domestic and Sexual Violence Response Professional (CDSVRP) certified by the Oklahoma Coalition Against Domestic Violence and Sexual Assault.

**"Certified batterer intervention program"** or **"Certified treatment program for batterers"** means a status which is granted to an entity by the Oklahoma Attorney General, and indicates approval to provide batterers intervention services and treatment programs pursuant to 74 O.S. § 18p-6. In accordance with the Administrative Procedures Act, 75 O.S. § 250.3(8), certification is defined as a "license."

**"Certified Domestic and Sexual Violence Response Professional"** means a professional certified by the Oklahoma Coalition Against Domestic Violence and Sexual Assault.

**"Certified domestic violence and sexual assault program"** or **"Certified DV / SA program"** means a status which is granted to an entity by the Oklahoma Attorney General, and indicates approval to provide domestic violence, sexual assault and stalking services pursuant to 74 O.S. § 18p-6. In accordance with the Administrative Procedures Act, 75 O.S. § 250.3(8), certification is defined as a "license."

**"Child"** or **"Children"** means any individual from birth to eighteen years of age.

**"Children's Activities"** means direct child contact that is temporary in nature and is not intended to address the effects of domestic violence, sexual assault/abuse and trauma on children i.e., child care, special events such as Christmas parties, Easter egg hunts, that is supervised by program personnel or volunteers.

**"Children's Services"** means direct child contact that is intended to address the effects of domestic violence, sexual assault/abuse and trauma on children including but not limited to intake, needs assessment, groups, advocacy and any other service related to domestic violence, sexual assault/abuse and trauma.

**"Client"** means an individual, adult or child, who has applied for, is receiving or has received assistance or services of a DV/SA or batterer's program.

**"Client record"** means written information including assessment information, description of services provided services plan, and other information on an individual client.

**"Community"** means the people, groups, agencies or other facilities within the locality served by the program.

**"Contract"** means a formal document adopted by the governing

authority of the program and any other organization, agency, or individual that specifies services, personnel or space to be provided to the program and the monies to be expended in exchange.

**"Counseling"** means a method of using various commonly acceptable treatment approaches provided face-to-face by a behavioral health professional either licensed or under supervision for licensure as a Licensed Professional Counselor, Licensed Marriage and Family Therapist, Licensed Behavioral Practitioner, Licensed Clinical Social Worker, psychiatrist or psychologist with clients in individual, group or family settings to promote positive emotional or behavioral change. A practicum student or intern in an accredited graduate program in preparation for one of the above licenses may provide counseling to victims of domestic violence, sexual assault or stalking and their dependents. Counseling is goal directed and utilizes techniques such as cognitive behavioral treatment, narrative therapy, solution-focused brief therapy, psycho-educational interventions or another widely accepted theoretical framework for treatment.

**"Court advocate"** means a qualified, trained staff or volunteer whose duties are to provide assistance to victims and their dependents in legal matters relevant to their situation. A Court Advocate provides support, information, assistance, safety planning, accompaniment and intervention with any aspect of the civil or criminal legal system on behalf of a victim of domestic violence, sexual assault or stalking.

**"Crisis intervention"** means an immediately available service to meet the psychological, physiological or safety aspects of domestic violence or sexual assault related crises in response to emergencies, to provide crisis resolution to stabilize conditions and may include triage, danger assessment, screening, planning, intervention, referral and documentation.

**"Critical incident"** means an occurrence or set of events inconsistent with the routine operation of the facility, or the routine care of a client. Critical incidents specifically include but are not necessarily limited to the following: adverse drug events; self-destructive behavior; deaths and injuries to clients, personnel, volunteers and visitors; incidents involving medication; neglect or abuse of a client; fire; unauthorized disclosure of information; damage to or theft of property belonging to a client or the facility; other unexpected occurrences; or events potentially subject to litigation. A critical incident may involve multiple individuals or results.

**"Direct services"** means services delivered by a qualified staff member or volunteer, in direct contact with a client or client's child, including child care and telephone contact.

**"Director"** means the person hired by the governing

authority to direct all the activities of the organization.

**"DV/SA"** means domestic violence and sexual assault.

**"Documentation"** means the provision of written, dated and authenticated evidence to substantiate compliance with standards, e.g., minutes of meetings, memoranda, schedules, notices, logs, records, policies, procedures, announcements, correspondence, and photographs.

**"Domestic violence"** means assaultive or coercive behaviors, including physical, sexual and psychological attacks and economic coercion, against another adult, emancipated minor or minor child, who are family or household members or who are or were in a dating relationship.

**"Education"** means the dissemination of relevant information specifically focused on increasing the awareness of the community and the receptivity and sensitivity of the community concerning domestic violence, sexual assault or batterer's intervention and other related problems and services and may include a systematic presentation of selected information to impart knowledge or instructions, to increase understanding of specific issues or programs, to examine attitude or behaviors and stimulate social action or community support of the program and its clients.

**"Emergency services"** or **"crisis services"** means a twenty-four (24) hour capability for danger assessment, intervention and resolution of a client crisis or emergency that is provided in response to unanticipated, unscheduled emergencies requiring prompt intervention.

**"Emergency transportation"** means transportation for a victim of DV/SA to a secured identified location at which emergency services or crisis services can be provided.

**"Executive director"** means the person in charge of a facility as defined in this section.

**"Facility"** means the physical location(s) of a certified program governed by this chapter of Title 75.

**"Family"** means the children, spouse, parents, brothers, sisters, other relatives, foster parents, guardians and others who perform the roles and functions of family members in the lives of clients.

**"Governing authority"** means a group of persons having the legal authority, and final responsibility for the operations and functions of the entire DV/SA program, **or** shelter, ~~or batterers intervention program~~ in and of all geographical locations and administrative divisions.

**"Group counseling"** means a method of using various commonly acceptable treatment approaches provided face-to-face by qualified staff with not more than twelve (12) clients to promote positive emotional or behavioral change. Counseling is goal directed and utilizes techniques such as cognitive behavioral treatment, narrative therapy, solution focused brief

therapy psycho-educational interventions or another widely accepted theoretical framework for treatment.

**"Guardian"** means an individual who has been given the legal authority for managing the affairs of another individual.

**"Indirect services"** means services delivered by a staff member or volunteer, that does not involve direct services with a client or client's child.

**"Initial contact"** means a person's first contact with the program or facility requesting information or service by telephone or in person.

**"Intake"** means the written information about a client as a basis for assessment or services, obtained by the program at time of admission.

**"Licensure"** means the official or legal permission to persons or health facilities meeting qualifications to engage in a given occupation or use a particular title.

**"Medical care"** means those diagnostic and treatment services which, ~~under the laws of the jurisdiction in which the program is located,~~ can only be provided or supervised by a licensed physician.

**"Medication"** means any prescription or over-the-counter drug, that is taken as prescribed or directed.

**"Mental health services"** means a range of diagnostic, therapeutic, and rehabilitative services used in treating mental illness or emotional disorders, including substance abuse.

**"Neglect"** means failing to provide adequate personal care or maintenance, or access to medical care which results or may result in physical or mental injury or harm to a client.

**"OAG"** means the Office of the Attorney General.

**"Objectives"** means a specific statement of planned accomplishments or results which are quantitative, qualitative, time-limited and realistic.

**"Oklahoma Administrative Code"** or **"OAC"** means the publication authorized by 75 O.S. § 256 known as The Oklahoma Administrative Code, or, prior to its publication, the compilation of codified rules authorized by 75 O.S. § 256(A)(1)(a) and maintained in the Office of Administrative Rules.

**"Operation"** means that clients are receiving services provided by the program.

**"Personnel record"** means a file containing the employment history and actions relevant to individual personnel and volunteer activities within an organization such as application, evaluation, salary data, job description, citations, credentials, etc.

**"Persons with special needs"** means persons with a condition which is considered a disability or impairment under the "American with Disabilities Act of 1990" including, but not limited to the deaf/~~hearing-impaired~~ **and hard of hearing**,

~~visually impaired~~ **blind**, physically disabled, developmentally disabled, persons with disabling illness, persons with mental illness. See "Americans with Disabilities Handbook," published by U.S. Equal Employment Opportunity Commission and U.S. Department of Justice.

**"Policies"** means statements of program intent, strategy, principle, or rules for providing effective and ethical services.

**"Primary Victim"** means a client who has experienced domestic violence, sexual assault, stalking or the consequences of these crimes first hand.

**"Procedures"** means the standard methods by which policies are implemented.

**"Program"** means a set of activities designed and structured to achieve specific objectives relative to the needs of the clients.

**"Program evaluation"** means the documented assessment activities, performed internally or externally, of a program or a service and its staff, activities and planning process to determine whether program goals are met, staff and activities are effective, and what effect, if any a program or service has on the problem which it was created to address or on the population which it was created to serve.

**"Program goals"** means broad general statements of purpose or intent.

**"Qualified staff"** means someone who has met the criteria for provision of direct services as defined in 75:15-13-20.

**"Rape crisis response services"** means "sexual assault services" as defined in this section.

**"Safe Home"** means private dwellings available for the temporary housing of victims of domestic violence, sexual assault and stalking to ensure safety of victims and their dependents until other housing arrangements can be made.

**"Safe Home Provider"** means an individual or family providing safe home services through a formal agreement with a Certified DV/SA Program.

**"Safety Planning"** means the process of working with the adult/child victim/survivor to develop tools in advance of potential abuse or violence for the immediate and long term safety of the victim/survivor. The plans should be based on the individual's dangerousness indicators and should include the safety needs of dependents.

**"Screening"** means the process of determining, preliminarily the nature and extent of a person's problem in order to establish the service needs of an individual. At a minimum, a screening shall include a brief personal history related to abuse, a review of the individual's strengths and resources, risk factors and referral needs.

**"Secondary Victim"** means a person with a relationship with

the primary victim.

**"Service agreement"** means a written agreement between two or more service agencies or service agencies and individual service providers defining the roles and responsibilities of each party. The purpose of service agreements is to promote coordination and integration of service programs for the purpose of curbing fragmentation and unnecessary service duplication in order to assure a continuation of services.

**"Service note"** means the documentation of the time, date, location and description of services provided, and signature of staff providing the services.

**"Service plan"** means a plan of action developed and agreed upon by the client and service provider that contains service appropriate goals and objectives for the client.

**"Sexual assault services"** means personal advocacy and support services provided to **primary and secondary** victims of rape and sexual assault in settings such as law enforcement, medical settings or program offices.

**"Shelter services"** means a residential living arrangement in a secure setting with support and advocacy services provided by qualified staff, for victims of domestic violence, sexual assault and stalking and their dependents.

**"Staff"** means personnel that function with a defined role within the program whether full-time, part-time or contracted.

**"Support"** or **"Supportive Services"** means services provided to victims of domestic violence/sexual assault and/or their families which augment or complement a defined service plan.

**"Transitional living services"** means housing maintained and operated by a Certified domestic violence and sexual assault program.

**"Universal precautions for transmission of infectious diseases"** means those guidelines promulgated by the U.S. Occupational Health and Safety Administration which are designed to prevent the transmission of Human Immunodeficiency Virus, hepatitis and other infectious diseases.

**"Update"** means a dated and signed review of a report, plan or program with or without revision.

**"Victim recovery services"** mean a face-to-face service, provided one on one by qualified staff to groups or individuals to maintain or develop skills necessary to perform activities of daily living and successful integration into community life. This service includes educational and supportive services regarding independent living, self care, social skills regarding development and lifestyle changes.

**"Volunteer"** means any person who is not on the program's payroll, but provides either indirect or direct services and fulfills a defined role within the program and includes interns and practicum students.

**75:15-1-3. Meaning of verbs in rules**

The attention of the facility is drawn to the distinction between the use of the words "shall," "should," and "may" in this chapter:

- (1) **"Shall"** is the term used to indicate a mandatory statement, the only acceptable method under the present standards.
- (2) **"Should"** is the term used to reflect the most preferable procedure, yet allowing for the use of effective alternatives.
- (3) **"May"** is the term used to reflect an acceptable method that is recognized but not necessarily preferred.

**75:15-1-4. Annual review of standards and criteria**

This chapter shall be reviewed annually by the Office of the Attorney General.

**75:15-1-5. Batterers Intervention Programs [REVOKED]**

**75:15-1-6. Service Programs [REVOKED]**

**SUBCHAPTER 2. DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS**

**75:15-2-1. Service programs**

- (a) All certified programs shall serve victims of domestic violence, sexual assault and stalking and their dependents or family members.
- (b) The program shall have policy and procedures to maintain facilities, staffing, and operational methods.
- (c) All certified programs shall provide sexual assault services and be part of a sexual assault response team in their service area, providing that there is a sexual assault response team in place. The program shall collaborate with other certified DV/SA providers in their service area. When appropriate staff is available, the program shall assist the Council on Law Enforcement Education and Training (CLEET) by providing appropriate staff to assist in sexual assault and sexual violence training to law enforcement. The program shall provide at a minimum the following services:

- (1) Counseling or advocacy and support services shall be provided in the social service, legal, law enforcement or medical setting, in program offices or at any safe and appropriate site, as needed by the client.
- (2) Twenty four (24) hours, seven (7) days per week access to these services through the program's crisis hotline.
- (3) A twenty-four (24) hour hotline, crisis intervention, in-person advocacy as needed, active listening, or support by trained staff or volunteers with a knowledge of the issues and processes of sexual assault, rape trauma

recovery, assessment, referral when indicated and family involvement where chosen by the victim.

(4) Needed clothing for the sexual assault victim.

(5) Follow-up contact that does not compromise privacy and safety needs of the victim shall be offered to all sexual assault clients seen in the medical setting. If written permission is granted by the client for follow-up contact, it shall be done no later than fourteen (14) business days after face-to-face crisis intervention. Follow-up will offer the client agency services or other available resources needed by the client.

(d) All certified programs shall provide crisis intervention including, but not limited to:

(1) Twenty-four (24) hour crisis telephone services staffed by trained staff or volunteers, 24-hour immediate, direct access to crisis advocates. Pagers, answering machines or answering services that do not provide immediate access to a crisis advocate shall not be sufficient to meet this requirement.

(2) Emergency housing such as hotel or motel available for victims and their dependent(s).

(3) Arrangement for safe shelter, food, clothing, and incidentals needed by victim/dependents.

(4) The crisis intervention program shall provide transportation or access to transportation for necessary or emergency services. This shall not require service providers to be placed in a situation that could result in injury.

(5) Cooperation with law enforcement to provide assistance to the victim and accompanying dependent(s).

(6) Provision of advocacy and referral to assist the victims in obtaining needed services or resources.

(7) Follow-up services shall be offered to all victims if victim safety is not compromised.

(e) All Certified programs shall provide counseling or support, support groups, advocacy, and victim recovery. Group and/or individual counseling or support services shall be made available before or after normal business hours (8 am to 5 pm), if needed by clients. These services shall minimally provide the following:

(1) A facility with offices, individual and group counseling space to provide services.

(2) Advocacy services, both in person and by telephone, either in the locations of other community services and systems, or in the program's offices. Other locations include but are not limited to those necessary to provide court advocacy services to clients.

(3) Current service agreement to be renewed every three (3)

years with available community services to provide access to a continuum of needed services for the client. If unable to establish a current service agreement with all appropriate resources in the community, efforts to do so or reasons/opinions why this is not or cannot be done shall be documented.

(4) A resource document of local, area, or state resources to facilitate referrals for clients.

(5) Service approaches that focus on the empowerment of victims to access needed resources and make healthy and safe decisions for themselves and dependents.

(6) For agencies that do not have a behavioral health professional on staff, the agency shall maintain an updated list of identified behavioral health professionals in their community who treat clients with sexual assault related trauma who need additional mental health or substance abuse services.

(f) All certified programs are required to conduct a name search of employees at least annually against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act while such person is working with or serving children. All persons working with or providing services to children shall be required to sign a statement declaring that he or she is not currently required to register under the provisions of the Oklahoma Sex Offenders Registration Act or the Mary Rippy Violent Crime Offenders Registration Act. Compliance with the signed statement shall be mandatory for all persons working with or providing services to children, and there shall be no liability or obligation placed upon any person or business to ascertain the truthfulness of the affidavit.

(g) Within five (5) business days of entry into shelter or transitional living or prior to providing children's services (excluding advocacy or children's activities or crisis intervention), all certified programs shall assess the risk and needs of the children accompanying primary victims and provide children's services to address the impact of violence and trauma in their lives and to facilitate healing. A risk and needs screening and assessment on each child shall minimally include information on his or her:

- (1) Safety, including but not limited to:
  - (A) History of child abuse or neglect;
  - (B) Exposure or witnessing violence;
  - (C) Child's response to witnessing violence;
  - (D) History of involvement in the child welfare system; including the presence of current child welfare involvement;
  - (E) Visitation with the perpetrator;

- (2) Brief trauma screening to assess the impact of trauma;
- (3) Developmental history to include speech and language, hearing and visual;
- (4) Medical or physical health history;
- (5) Social history to include interactions with peers;
- (6) History of use of tobacco, alcohol or other drugs;
- (7) Parent/guardian custodial status;
- (8) Community referral needs.

Services provided to each child shall be culturally sensitive while addressing the identified risk and needs and shall minimally include:

- (1) safety planning that is appropriate with respect to the child or adolescent's age, development, and education;
- (2) a specific safe, protected play area for children;
- (3) advocacy with community systems;
- (4) referral to community resources for needed services;
- (5) linkage and advocacy with the local school system to provide for ongoing educational needs;
- (6) parenting support for clients, if applicable; and
- (7) Children's groups using age appropriate topics and based on established best practices.

(h) Pursuant to ~~Title 10 O.S. § 7103~~, **Title 10A O.S. § 1-2-101**, any person having reason to believe that a child under the age of eighteen (18) years is a victim of abuse or neglect, shall report the matter promptly to the Department of Human Services.

(i) All Certified programs shall maintain an atmosphere and provide services that are free from all forms of unlawful discrimination based on race, sex, religion, color, age, national origin, and/or disability (including physical, mental illness, and substance abuse).

(j) All certified programs shall provide public education to increase the community's awareness and understanding of domestic violence, sexual assault and stalking, available and needed resources, and identify the role community can play in eliminating domestic violence, sexual assault, and stalking.

(k) Compliance with 75:15-2-1 shall be determined by a review of the program's policy and procedures, service agreements, on site observation, client and staff interviews and/or other supporting documentation.

#### **75:15-2-2. Shelter program**

(a) All shelter programs shall comply with section 75:15-2-1 and each shelter program shall provide long-term (thirty [30] days or more) shelter services and staffing to provide services twenty-four (24) hours per day, seven (7) days per week and provide the following services:

- (1) A group living program providing room, board, bathing and laundry facilities, necessary clothing and toiletries for victims and their children.

(2) Shelters shall be staffed at all times when clients are in residence. When there are no clients in residence, each shelter program must assure availability for immediate contact or services.

(3) The shelter's policy shall have written procedures regarding the supervision of children.

(4) Shelter programs shall provide screening, referral and linkage to clients and callers to appropriate community resources, to include assistance in making initial contact.

(5) The shelter program shall maintain cooperation/liaison with the local school system.

(6) Each shelter program must ensure to the best of their ability the safety, security, and confidentiality of clients and the location of the shelter.

(7) The shelter shall maintain involuntary discharge criteria.

(b) Compliance with 75:15-2-1 shall be determined by a review of policy and procedures, service agreements, on site observation, and/or other supporting documentation.

### **75:15-2-3. Transitional living program**

(a) All transitional living programs shall comply with 75:15-2-1 and the following:

(1) The program shall maintain homes, apartments, or other residential living environments suitable for survivors of domestic and sexual violence, stalking and their dependents, if applicable, and which provide the reasonable safety and privacy needed by this population. The program shall provide access to necessary furniture and equipment.

(2) The program shall include heating and refrigerated cooling systems to maintain a reasonable comfort level.

(3) Supportive services for residents are available through the twenty-four (24) hour program hotline by trained staff or volunteers.

(4) The program shall assign staff as the advocate or liaison for the clients residing in the transitional living program(s). This person, or a crisis line staff person, shall be available for emergencies at all times.

(5) The program shall have a written agreement with each resident that outlines specific responsibilities of both the program and the resident to include expectations, responsibilities, and limitations. The agreement shall be signed by both parties.

(6) The program shall offer weekly support groups for transitional living residents and children.

(7) The program shall offer at least one 30 minute face to face service contact per week with each transitional living

residents and children.

(b) Compliance with 75:15-2-2 shall be determined by a review of program policy and procedures, client records, onsite observation, written agreements and/or other supporting documentation.

**75:15-2-4. Safe home program**

(a) All safe home programs shall comply with section 75:15-2-1 and the following:

(1) The program shall provide confidential housing 24 hours a day, 365 days a year.

(2) Certified DV/SA providers that have a formal agreement for a safe home shall:

(A) assure that each safe home provides residents with access to minimum necessities including bedding, clothing, articles for grooming and personal hygiene, and food;

(B) develop and disseminate to safe home providers and residents written rules, policies and procedures that include admission and exit criteria including security measures;

(C) have written procedures for monitoring safe homes to ensure that the homes meet standards for cleanliness and safety;

(D) provide orientation to all clients and require they sign a contract acknowledging they have read and understand the rules of their stay;

(E) assign an advocate or liaison for clients. This person, or a crisis line staff, shall be available for emergencies and support at all times; and

(F) provide at least one 30 minute face-to-face service contact per week with each safe home resident.

(b) The program shall establish criteria to screen potential safe home providers. Screening will include an application with references, an interview, and a site visit. Each Safe Home will be reassessed annually.

(c) All safe homes must be supervised by the certified program who will conduct on-site observations at least monthly when clients are in residence.

(d) The certified program shall have a written agreement with each safe home provider that outlines specific responsibilities of both the program and the provider to include expectations and limitations (e.g., no babysitting or individual advocacy) and compliance with confidentiality. The agreement shall clearly state that the program will not be held liable for damage incurred by the safe home provider. Both parties will sign the agreement.

(e) Compliance with 75:15-2-3 shall be determined by a review of program policy and procedures, client records, on site

observation, written agreements, and/or other program documentation.

**SUBCHAPTER 3. DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS [REVOKED]**

**SUBCHAPTER 4. BATTERERS INTERVENTION PROGRAMS [REVOKED]**

## **SUBCHAPTER 5. CLIENT RECORDS AND CONFIDENTIALITY**

### **75:15-5-1. Purpose**

The purpose of this subchapter is to set forth the standards and criteria governing client records and confidentiality of client information, including client records, for domestic violence, sexual assault and stalking clients.

### **75:15-5-2. Client records**

(a) A certified program shall have and maintain a master client index system containing the client's name, and the program's discreet numerical or letter identifier.

(b) A certified program shall have written policy and procedures for correcting errors on record material by lining through, initialing the error, and inserting the correct material either above the error or at the end of the entry. Further, the policy and procedures shall forbid the use of "white-out" or any action which obliterates the error.

(c) Compliance with 75:15-5-2 shall be determined by on-site observation, client records and any other supporting program documentation.

### **75:15-5-3. Record content - general**

(a) Client records shall contain, at a minimum, the following information:

(1) Intake and screening information:

(A) Client's name;

(B) Date of initial contact/intake;

(C) Pertinent medical information, including substance abuse;

(D) Emergency contact information;

(E) History/nature of abuse including dangerousness assessment including a description of the event that precipitated the request for services; and

(F) Perpetrator information if known.

(2) Service notes, which shall minimally include:

(A) The date, location, start time, duration and description of services provided delineated by time spent and service code;

(B) The signature of staff providing the services; and

(3) Service plan focusing on victim safety and, well-being which shall minimally include:

- (A) Goals and objectives of the client, which shall be developed and agreed upon between the client and staff; and
  - (B) Service plans and their updates shall be signed and dated by the client and staff.
- (4) Exit information, which shall minimally include:
- (A) Documentation that the client participated in planning for his or her exit from the program;
  - (B) The reasons for the client's exit or departure; and
  - (C) Client and staff dated signatures or an explanation if staff were unable to obtain the client's signature.
- (b) Each client record entry shall be legible, dated, and signed by the staff member making the entry.
- (c) Compliance with 75:15-5-3 shall be determined by a review of program policy and procedures; review of the client records for content; and/or other supporting program documentation.

**75:15-5-3.1. Record content - service specific**

(a) Client records for specific services shall conform to the following:

(1) Shelter Services:

(A) On a client's entry to the shelter, staff shall record the client's name, emergency contact person(s) and any referral for medical or emergency services. This information may be a part of the full intake interview if the full intake is done on entering the shelter.

(B) Shelter clients shall have the full intake interview and screening completed within ~~twenty-four~~ **forty-eight (48)** hours of entry into the shelter.

(C) Service plans shall be completed within five (5) business days of the shelter client's entry to the shelter.

(D) The service plan shall be reviewed and updated at least every two (2) weeks.

(E) The client's service plan shall include components which address the needs of each child accompanying the client.

(F) The service plan shall include safety issues for client and children.

(G) A daily note.

(2) Crisis Intervention Services:

(A) All face-to-face contacts with active clients are documented and contacts with persons not receiving additional services shall be documented. Documentation shall minimally include the following:

(i) Staff/Volunteer Name and signature;

- (ii) Date, time, length, and location of intervention;
- (iii) Client's name, age, race, county of residence, and contact number if given.
- (iv) Protective order information if applicable;
- (v) Personnel involved such as police, hospital, etc.;
- (vi) Summary of contact including visible injuries, treatment and services requested;
- (vii) Outcome;

(B) All telephone contacts shall be documented. Documentation shall minimally include the following:

- (i) Staff/Volunteer name;
- (ii) Date, time and length of call;
- (iii) Caller's name and contact number, if given; However, no caller shall be required to give a name, phone number or any other identifying information as a condition to receive information or domestic violence, sexual assault or stalking services;
- (iv) Summary of the call including services needed;
- (v) Outcome; and
- (vi) Follow-up services offered if victim safety is not compromised.

(C) Contact information is kept by the crisis intervention program.

(D) Clients to be transported to shelter facilities shall be screened before the shelter referral is made. If the client is in immediate danger, or no safe housing is available, this screening may be initially waived. If the screening is waived, documentation shall reflect the reason(s) and the notification of such to the shelter.

(3) Counseling, Support and Advocacy Services:

- (A) An assessment of the client's needs shall be completed by the third (3rd) counseling or advocacy session.
- (B) A service plan shall be completed by the fifth (5th) advocacy or counseling session.
- (C) A service plan review and update shall be completed at least every six (6) months.

(4) Sexual Assault Services:

- (A) For victims who continue in support or counseling sessions, a service plan shall be developed by the fifth (5th) visit.
- (B) Service plans shall be reviewed and updated at least every ninety (90) days.

(5) Transitional Living Services:

(A) A service plan shall be developed within five (5) business days of the client moving in.

(B) The service plan shall be reviewed and updated at least every ninety (90) days.

(6) Safe home Services

(A) A service plan that includes goals agreed upon by the client and sponsoring family shall be developed within five (5) business days of the client moving in. On a client's entry to the safe home, the safe home provider shall record the client's name, emergency contact information, and pertinent medical information.

(B) Safe Home clients shall receive a full intake interview and screening by program staff within twenty-four (24) hours of admission or by the first business day following admission.

(C) A service plan shall be developed within five (5) business days of the client's entry to the safe home.

(D) All records regarding the client shall be retained in the client's record at the sponsoring program.

(b) Where required information is not obtained, efforts to comply with the requirements of this subsection shall be documented in the client record.

(c) Compliance with this 75:15-5-3.1 shall be determined by a review of client records, policy and procedures, call logs, and/or other supporting documentation.

**75:15-5-4. Client confidentiality**

(a) Case or client records, files or notes, of a DV/SA program shall be confidential and shall only be released under certain prescribed conditions (74 O.S. § 18p-3).

(b) The program shall have written policy and procedures to ensure confidentiality of client information and identity and shelter location and govern the disclosure of information including verbal disclosure contained in client records. When a client record is established, the program shall discuss the confidentiality requirements with each client and maintain documentation in the client record that they have reviewed the circumstances under which confidential information may be revealed.

(c) Compliance with 75:15-5-4 shall be determined by a review of the program's policy and procedures; and on-site observation of the handling and review of client records.

**75:15-5-5. Physical safety and integrity of client records**

(a) Client records shall be maintained in a locked and secure manner. The program shall have written policies and procedures to safeguard the record and information contained in the record

against loss, theft, defacement, tampering, or unauthorized access or use.

(b) Compliance with 75:15-5-5 shall be determined by a review of the program policy and procedures; on-site review of locking mechanisms and procedures to assure security; and onsite observation of the handling of client records.

**75:15-5-6. Client record, handling, retention, and disposal**

(a) A program shall have written policy and procedures addressing the storage, retention period, and method of disposal of client records. This policy and procedures shall be compatible with protecting clients' rights against unauthorized confidential information disclosures.

(b) Client records shall be easily retrieved by staff as needed for providing and documenting services.

(c) Compliance with 75:15-5-6 shall be determined by a review of the program's policy and procedures, and a review of office and files.

**75:15-5-10. Confidentiality of mental health and drug or alcohol abuse treatment information [REVOKED]**

**SUBCHAPTER 7. PHYSICAL ENVIRONMENTS**

**75:15-7-1. Physical plant, primary role**

(a) The primary role of programs is to provide safety; and to protect the confidentiality and privacy of victims of domestic violence, sexual assault, stalking and their dependent family members. The physical plants of programs shall not be utilized in any manner which fails to guarantee the confidentiality, safety, and protection of the victims, their dependents and staff.

(b) Facilities that serve both victims and batterers in the same facility shall have written procedures to ensure that its services do not jeopardize the safety and psychological well being of victims.

(c) Programs shall obtain written permission from the Office of the Attorney General Victims Services Unit before using any shelter or housing option, for purposes other than housing for victims of DV/SA.

(d) Compliance with 75:15-7-1 shall be determined by a review of program policies and procedures and a tour of the facility.

**75:15-7-2. Fire and safety codes and inspections**

(a) The physical environments of shelter facilities, housing options and all office space shall meet safety, zoning, and building code regulations required by local, state, and federal authorities; and shall obtain and maintain an annual fire and safety inspection from local or state authorities.

(b) Compliance with 75:15-7-2 shall be determined by a review of the annual fire and safety inspection report.

**75:15-7-3. Fire fighting and first aid equipment**

(a) All facilities shall have a first aid supply kit and annually maintained fire extinguishers.

(b) Compliance with 75:15-7-3 shall be determined by on-site observation and by interviewing staff.

**75:15-7-4. Disaster procedures**

(a) There shall be written procedures describing the emergency plans in case of a disaster, whether internal or external, or in case of threat to the safety of any client or staff person. Evacuation routes, inside sheltering sites, and fire extinguisher locations shall be posted.

(b) Fire, tornado, bomb threat and intruder drills shall be conducted annually. The date, time, and type of the drill shall be documented.

(c) Compliance with 75:15-7-4 shall be determined by on-site observation, a review of written procedures, staff interviews, and documentation of drills.

**75:15-7-5. Persons with special needs**

(a) Pursuant to the Americans with Disabilities Act of 1990, The the program building shall allow access for all clients and staff shall ensure that persons with disabilities are not excluded from services. Programs are required to integrate a person with a disability into agency services, unless providing separate services is the only way to provide equal opportunities for services. Referrals must be provided when necessary, and the program shall have written procedures for referrals of disabled persons who can not be served on-site. Service and companion animals should be allowed in facilities unless the animal poses a direct threat to the health/safety of others. Auxiliary aids/services should be provided as necessary to ensure effective communication unless doing so would cause an undue burden (i.e., significant difficulty or expense) or fundamental alteration in services. Alterations to existing buildings must be accessible to the maximum extent feasible. All newly constructed facilities must be accessible to persons with disabilities unless it is structurally impractical. (Americans with Disabilities Act of 1990) Resource: Americans with Disabilities Handbook, published by (U.S.) Equal Employment Opportunities Commission, and the (U.S.) Department of Justice.

(b) Compliance with 75:15-7-5 shall be determined by a review of program policy and procedures.

**75:15-7-6. Program environment**

(a) The program environment shall meet the following conditions:

(1) The facility shall be accessible by an all-weather road.

(2) The facility shall have adequate space in which to carry out the program's goals and objectives, including outdoor areas and equipment when appropriate.

(3) The facility shall have heating and air conditioning equipment adequate to maintain the temperature in areas utilized by clients at between 65oF and 85oF.

(4) The facility shall have adequate ventilation and air circulation provided in the facility to assure an environment that will be comfortable for the clients.

(5) The facility shall have water from an approved tested potable source.

(6) The facility shall have, at minimum, a commode and, lavatory facility. The privacy of individuals shall be assured while using these facilities.

(7) All doors, including those for each closet, bedroom, bathroom, and office, shall be easily opened from both sides.

(8) Smoking shall not be allowed in any indoor portion of any facility.

(9) Facility sanitation shall be maintained to prevent offensive odors and insect infestation.

(10) All facilities shall have emergency back up lighting.

(11) Telephones shall be provided for the convenience of the staff, and the necessary accommodation of the clients. Pay telephones only are not acceptable.

(12) There shall be written policy and procedures addressing the use of any outdoor recreational space, including required supervision and the safety of pre-schoolers.

(13) Toxic materials and dangerous substances, such as toxic cleaners, insecticides, and matches shall be stored in a non-client area, locked space where they are not accessible to children.

(14) Combustible materials shall be stored in locked non-flammable containers.

(15) The Poison Control Center's toll-free telephone number shall be posted and visible to staff and clients at all times.

(b) Compliance with 75:15-7-6 shall be determined by a review of program policy and procedures, staff and client interviews, and on-site observation.

**75:15-7-7. Program environment, shelter services programs**

(a) All certified shelter services programs shall comply with section 75:15-7-6 and the following:

(1) Baby beds and high chairs that ensure children's safety and comfort shall be available for infants and small children.

(2) The facility shall have access to outdoor recreational space and playground equipment located, installed, and maintained as to ensure the safety of the clients and their children. The grounds and access thereto shall be maintained in a manner that shall ensure the area is free of any hazard to health or safety.

(3) Safe and adequate internal play space for children, including outlet protectors and gated stairwells.

(4) Kitchens used for meal preparation in the residential facility shall be provided with the necessary equipment for the preparation, storage, serving, and clean-up of all meals. All equipment shall be maintained in working order.

(5) Provisions shall be made to assist or make food available for meal preparation that accommodates special diets.

(6) The facility shall have, at minimum, a commode, lavatory, and bathing facility at a ratio of one (1) to twelve (12) residents, including infants and children. The privacy of individuals or families shall be assured while using these facilities.

(7) Residents' rooms shall be so arranged that the client has direct access to a hallway or common area without having to pass through other resident's rooms or areas.

(8) There shall be written policy and procedures for laundry and linens, addressing frequency of changing linens, and laundry arrangements within the facility.

(9) Laundry equipment shall be provided within the residential facility, and shall be kept clean, well-maintained, and properly ventilated.

(10) Reasonable space shall be provided for storage of clients' personal belongings.

(11) Written policy and procedures shall address secure storage of client valuables.

(12) Written policy and procedures shall address the secure handling and storage of client medications, including policy to document client access to medication.

(13) The facility shall be secured by double locks or locking devices such as chains, bolts, etc. on ground floor doors. However, documentation that the locking system meets state and local fire code inspection shall be accepted. When key-locked deadbolts are used, the location of the keys must be identified and readily accessible.

(14) All outdoor openings such as windows shall be covered for privacy.

(15) Provision shall be made for cleaning the facility minimally once per week. A written work schedule or other form of notification shall be posted, which clearly delineates each individual's responsibility for various tasks.

(b) Compliance with 75:15-7-7 shall be determined by a review of program policy and procedures; shelter rules, staff and client interviews where appropriate, and on-site observation.

**75:15-7-8. Program environment, safe home services program**

(a) All safe home services programs shall comply with section 75:15-7-6 (a) (1)-(11) and the following:

(1) The facility shall have, at minimum, a commode, lavatory, and bathing facility at a ratio of one (1) for every eight (8) persons, including infants and children. The privacy of individuals or families shall be assured while using these facilities.

(2) Written policy and procedures shall address the secure handling and storage of client medications, including policy to document client access to medication.

(3) The safe home shall be secured by double locks or locking devices such as chains, bolts, etc. on ground floor doors which meets state and local fire code inspection. When key-locked deadbolts are used, the location of the keys must be identified and readily accessible.

(4) All outdoor openings such as windows shall be covered for privacy.

(b) Compliance with 75:15-7-8 shall be determined by a review of program policy and procedures, provider and client interviews where appropriate, and on-site observation.

**75:15-7-9. Program environment, transitional living services program**

(a) All transitional living services programs shall comply with section 75:15-7-6 (a)(1)-(10) and the following:

(1) operable smoke detectors;

(2) 24-hour access to a telephone **for emergencies**;

(3) secured by double locks or locking devices such as chains, bolts, etc. which meets state and local fire code inspection; and

(4) outdoor openings such as windows shall be covered for privacy.

(b) Compliance with 75:15-7-9 shall be determined by a review of program policy and procedures, provider and client interviews where appropriate, and on-site observation.

## **SUBCHAPTER 9. PROGRAM MANAGEMENT AND PERFORMANCE IMPROVEMENT**

### **75:15-9-1. Admission criteria**

(a) The agency shall have specific written criteria for each program service component identifying persons for whom the services are intended, and persons who are excluded from receiving services.

(b) The program shall have a written policy requiring referral of any individual who does not meet services criteria.

(c) Compliance with 75:15-9-1 shall be determined by a review of written program policy and procedures.

### **75:15-9-2. Program management, policy and procedures**

(a) The agency shall maintain written policy and procedures which describe each program service component, the rules client's are expected to follow for each component, and staff duties. Policies shall include but are not limited to:

(1) Physical punishment of children shall not be allowed.

(2) Length of stay limitations, if any.

(3) Participation in housekeeping, food preparation or other activities, if applicable.

(b) Clients shall be given a copy of program rules and the provision of such shall be documented in the client record.

(c) The program shall have a written policy of the intent to comply with the Americans with Disabilities Act of 1990.

(d) Compliance with 75:15-9-2 shall be determined by a review of the program's written policy and procedures; rules; client interviews and record documentation.

### **75:15-9-7. Program mission and goals**

(a) The program shall have a written mission statement, and annually state in writing the program's goals.

(b) The annual program goals shall be approved by the agency's governing body each year, and shall be disseminated to personnel and volunteers.

(c) Compliance with 75:15-9-7 shall be determined by a review of the mission statement, program's annual goals, governing body minutes, staff meeting minutes and any other relevant documentation provided by the program.

### **75:15-9-8. Annual program evaluation**

(a) The agency shall conduct an annual evaluation of the program's services, facilities and policy and procedures. This evaluation shall be carried out according to a written plan established in policy and procedures to include the plan of evaluation, data to be reviewed, and the persons to conduct the evaluation, e.g., governing body members, staff, or other persons. The evaluation shall include an assessment to identify special populations of victims of sexual assault, domestic

violence and stalking who are underserved or who have special needs.

(b) Upon completion, this evaluation shall be submitted and reviewed by the governing body, and made available to personnel and volunteers.

(c) Compliance with 75:15-9-8 shall be determined by a review of the program evaluation, policy and procedures, staff meeting minutes and/or any other supporting documentation.

#### **75:15-9-9. Critical incidents**

(a) The program shall have policy and procedures requiring documentation and reporting of critical incidents.

(b) Each critical incident shall be recorded and monitored as follows:

(1) agency name and name and signature of the person(s) reporting the critical incident;

(2) Client ID(s), staff member(s), and/or property, involved in the critical incident;

(3) the date, time and physical location of the critical incident, if known, and the name of the staff person the incident was reported to;

(4) a description of the incident;

(5) severity of each injury, if applicable. Severity shall be indicated as follows:

(A) no off-site medical care required or first aid care administered on-site;

(B) medical care by a physician or nurse or follow-up attention required; or

(C) hospitalization or immediate off-site medical attention was required;

(6) resolution or action taken, date action taken and signature of the agency director or authorized designee;

(c) Critical incidents that shall be reported to the Office of the Attorney General are reported as follows:

(1) Critical incidents requiring medical care by a physician or nurse or follow-up attention and incidents requiring hospitalization or immediate off-site medical attention shall be delivered via fax or mail to the Office of the Attorney General Victims Services Unit within forty-eight (48) hours, or if the incident occurs on a weekend or holiday, the next business day of the incident being documented.

(2) Critical incidents involving disaster at a facility, death or client abuse shall be reported to the Safeline at 1-800-522-7233 immediately via telephone. The notification shall be followed with a written report from the reporting agency within twenty-four (24) hours of the incident and delivered via fax or mail to the Office of the Attorney

General Victims Services Unit.

(d) Compliance with 75:15-9-9 shall be determined by a review of policy and procedures, critical incident reports at the program and those submitted to the Office of the Attorney General Victims Services Unit.

75:15-9-10. Performance improvement plan [REVOKED]

SUBCHAPTER 11. CLIENT RIGHTS [REVOKED]

75:15-11-1. Client rights, shelter and residential services [REVOKED]

75:15-11-2. Client rights, non-shelter residential services [REVOKED]

75:15-11-3. Client's grievance policy [REVOKED]

## SUBCHAPTER 13. PERSONNEL AND VOLUNTEERS

### PART 1. PERSONNEL

#### 75:15-13-1. Personnel policies and procedures

(a) The program shall have written policies and procedures governing the conditions of agency employment to include appropriate screening and background inquiries to ensure client safety and confidentiality.

(b) The agency's policy and procedures shall be accessible to all personnel and each shall be informed of personnel policies and procedures, and any other materials regulating or governing the conditions of their employment.

(c) Written policies and procedures shall ensure personnel are informed of any changes to these a fore stated materials.

(d) Compliance with 75:15-13-1 shall be determined by a review of the program's personnel policies and procedures, interviews with staff, review of staff meeting minutes and/or other supporting documentation.

**75:15-13-2. Policy and procedures, personnel and volunteer knowledge and access [REVOKED]**

#### 75:15-13-3. Non-discrimination

(a) The agency's policies and procedures shall include provisions for non-discrimination with regard to the agency's relationship with personnel in accordance with applicable state and federal laws.

(b) Compliance with 75:15-13-3 shall be determined by a review of the program's written policy and procedure, and staff interviews.

#### 75:15-13-4. Selection of personnel

(a) The methods for selecting personnel shall be described in policy and procedures and shall include, but not be limited to:

(1) The processes for recruitment, selection and appointment; and

(2) Written criteria demonstrably related to the position

being filled.

- (b) Compliance with 75:15-13-4 shall be determined by:
- (1) A review of the policies and procedures.
  - (2) A review of job descriptions for personnel.
  - (3) A review of any other supporting documentation.

**75:15-13-5. Job descriptions, personnel**

(a) The agency shall have written job descriptions for personnel defining the duties of, and minimum qualifications for, each position.

- (b) Compliance with 75:15-13-5 shall be determined by:
- (1) a review of the program's policies and procedures, and
  - (2) a review of the program's job descriptions.

**75:15-13-8. Personnel records**

(a) The agency shall maintain record(s) for each staff member selected and utilized; documentation shall minimally include:

- (1) job description;
- (2) employment application or resume;
- (3) documentation of current qualifications and training as required and defined in the job description;
- (4) duty or work assignment;
- (5) record of hours worked or hours of service performed;
- (6) record of participation in training;
- (7) staff performance evaluation(s); and
- (8) emergency notification information.

(b) Compliance with 75:15-13-8 shall be determined by a review of personnel records.

**75:15-13-9. Supervision of personnel**

(a) A certified program shall establish in writing lines of supervision for all personnel.

(b) Compliance with 75:15-13-9 shall be determined through a review of the program's policy and procedures, or any other supporting documentation provided, including but not limited to, personnel manuals, organizational charts, job descriptions, and personnel files.

**75:15-13-10. Performance evaluation of personnel**

(a) The agency shall have policies and procedures mandating the evaluation of personnel employment and service performance. These policies and procedures shall minimally include:

- (1) performance evaluations shall be completed at least annually, to include an evaluation of the executive director;
- (2) define the reason(s) for any evaluation other than annual;
- (3) performance evaluations shall be in writing and based

- on the staff's job description;
- (4) each evaluation shall be individually discussed with the staff;
  - (5) personnel shall have a documented opportunity to respond, in writing, to each of their individual performance evaluations;
  - (6) both staff and supervisor shall sign and date the performance evaluation. However, the evaluation document shall state the staff's signature does not necessarily constitute agreement with the evaluation content.
- (b) Compliance with 75:15-13-10 shall be determined by a review of:
- (1) program policies and procedures, governing authority meeting minutes where applicable, and
  - (2) review of personnel files

## **PART 2. VOLUNTEERS**

### **75:15-13-12. Volunteer policies and procedures**

- (a) The program shall have written policies and procedures governing volunteer utilization to include appropriate screening and background inquiries to ensure client safety and confidentiality.
- (b) The agency's policies and procedures shall include provisions for non-discrimination with regard to the agency's relationship with volunteers in accordance with applicable state and federal laws.
- (c) Compliance with 75:15-13-12 shall be determined by a review of the program's written policy and procedure, and volunteer interviews.

### **75:15-13-13. Supervision of volunteers**

- (a) A certified program shall establish in writing lines of supervision for all volunteers.
- (b) A certified program shall ensure each volunteer has the knowledge appropriate to his or her job duties and are supervised by personnel.
- (c) Compliance with 75:15-13-13 shall be determined through a review of the program's policy and procedures, and any other supporting documentation provided, including but not limited to, volunteer manuals, and organizational charts.

### **75:15-13-14. Volunteer records**

- (a) The agency shall maintain record(s) for each volunteer selected and utilized; documentation shall minimally include:
  - (1) duty or work assignment;
  - (2) record of hours worked or hours of service performed;
  - (3) record of participation in training; and
  - (4) emergency notification information.

(b) Compliance with 75:15-13-14 shall be determined by a review of personnel records

### PART 3. TRAINING

75:15-13-20. Employee, paraprofessional and volunteer development plan  
[REVOKED]

#### 75:15-13-20.1. Orientation - general, personnel and volunteers

(a) A certified program shall provide a minimum of ~~10~~ 16 hours orientation training that incorporates the use of adult learning techniques (i.e., scenarios, role playing) to familiarize new personnel and volunteers providing direct services with the program which includes, but is not limited to:

- (1) Program goals and services of each service component;
- (2) Program policy and procedures;
- (3) Confidentiality, to include verbal confidentiality whether inside or outside the facility and client records;
- (4) Facility safety and disaster plans;
- (5) First aid kits and fire extinguishers, their location, contents and use;
- (6) Universal precautions;
- (7) Client rights;
- (8) Domestic violence and its effects on victims and children;
- (9) The cycle of domestic violence;
- (10) Power and control tactics of abuse;
- (11) Crisis intervention techniques;
- (12) Sexual assault;
- (13) Stalking;
- (14) Victim advocacy;
- (15) Parenting and disciplinary techniques;
- (16) Active and empathetic listening techniques including hotline skills;
- (17) Accessing resources needed by victims and their families including how to ensure services and access resources for persons with disabilities;
- (18) Safety planning for adults and age appropriate safety planning for children;
- (19) Basic child development;
- (20) Legal and ethical issues;
- (21) Cultural Sensitivity, and
- (22) Effects of trauma including post traumatic stress disorder.

(b) Volunteers providing indirect services and children's activities are required to complete orientation as prescribed by the Executive Director which shall include training on confidentiality and facility safety and disaster plans.

(c) Orientation for personnel must take place within 30 days of

employment or prior to unsupervised direct client contact and services. Volunteer orientation must occur within 6 months or prior to unsupervised, direct client contact and services. The Executive Director of a facility may waive orientation training if documented that the staff or volunteer has completed the requisite program training within the past year.

(d) Compliance with 75:15-13-20.1 shall be determined by a review of the written policies and procedures, and personnel and volunteer training manuals and records.

**75:15-13-20.2. Inservice and ongoing training for personnel and volunteers**

(a) A certified program shall have policy and procedures mandating, at the minimum, sixteen (16) hours of annual training of all staff which shall include:

(1) Confidentiality, to include verbal confidentiality whether inside or outside the facility and client records;

(2) Facility safety and disaster plans;

(3) First aid kits and fire extinguishers, their location, contents and use;

(4) Universal precautions, and

(5) Client rights and;

**(6) Legal and ethical issues.**

(7) The remaining hours of annual training shall be related to domestic violence, sexual assault, stalking, batterers intervention and administration as prescribed and approved by the Executive Director.

(b) A certified program shall have policy and procedures mandating a minimum of four hours annual training of all volunteers providing direct services, related to domestic violence, sexual assault, and stalking as prescribed and approved by the Executive Director.

(c) Individuals that volunteer indirect services and do not meet the requirements for a volunteer providing direct services as defined in OAC 75:15-1-2 shall receive annual training as prescribed by the Executive Director, but do not have a minimum number of training hours required.

(d) Documentation of training must include the topic of the training, the name of the trainer(s), the date of the training, the length of the training session, the sponsor of the training, and approval of the training by the Executive Director of the agency.

(e) A Certified Domestic and Sexual Violence Response Professional in good standing with the Oklahoma Coalition Against Domestic Violence and Sexual Assault (OCADVSA) shall be deemed to be current with annual training requirements upon completion of required annual training set forth in subsection (a) above. A copy of the current certification card issued by the OCADVSA shall be evidence of good standing.

(f) Compliance with 75:15-13-20.2 shall be determined by a review of policy and procedures; review of training records and other provided documentation of personnel training; and a review of personnel or volunteer records.

**75:15-13-24. Personnel training, children's services**

(a) Prior to providing any direct services, children's services personnel shall receive the prescribed orientation training and minimally have one (1) year employment or volunteer experience in a child care or service related field, or an equivalent combination of education, training and experience in child care or development issues.

(b) Compliance with 75:15-24 shall be determined by:

- (1) Review of program's policy and procedures.
- (2) Review of program's training records and other provided documentation of staff training.
- (3) Review of personnel or volunteer records.

**75:15-13-25. Personnel training, sexual assault services**

(a) Prior to providing any direct services or CLEET training, all sexual assault services staff shall receive a minimum of ~~eight (8)~~ **six (6) hours** classroom training in addition to basic orientation which shall include but not be limited to ~~information regarding sexual assault and rape, date rape, spousal rape, incest, stalking and sexual harassment, as well as training in safety planning and local procedures for providing sexual assault services for victims of rape:~~

- (1) Sexual abuse within the family (i.e., incest, sibling abuse, marital and domestic relationship rapes).**
- (2) Sexual assault outside the family (i.e., stranger, non-stranger, abuse by professionals, sexual harassment and bullying)**
- (3) Sexual assault within institutions (i.e., nursing homes, residential facilities, prisons, military)**
- (4) Commercial sexual exploitation (i.e., prostitution, trafficking, pornography, escort services)**
- (5) Non-traditional client populations (i.e., males, victims of same sex, bisexual or transgender, non-English speaking, undocumented immigrants, victims with cognitive disabilities or who are deaf or hard of hearing.**
- (6) Other topics to increase skills such as post-traumatic stress syndrome as it relates to rape trauma, rape trauma syndrome, self-injury and alcohol and drug use.**

(b) Compliance with 75:15-13-25 shall be determined by:

- (1) Review of program's policy and procedures.
- (2) Review of program's training records and other provided documentation of staff training.
- (3) Review of personnel or volunteer records.

**75:15-13-26. Personnel training, transitional living services**

(a) Prior to providing any direct services, all transitional living services personnel shall receive the prescribed orientation training and minimally have at least six (6) months experience working or volunteer experience in a certified domestic violence/sexual assault program, or related service. When there is staffing shortage situations, a staff person-in-training may be utilized if under the direct supervision of a trained, experienced staff person.

(b) Compliance with 75:15-13-26 shall be determined by:

- (1) Review of program's policy and procedures.
- (2) Review of program's training records and other provided documentation of staff training.
- (3) Review of personnel records.

**75:15-13-27. Provider training, safe home services**

(a) Prior to providing any direct services, all safe home providers shall minimally receive ten (10) training hours provided by a staff member of a DV/SA program certified to provide safe home services, which shall minimally include:

- (1) the nature and scope of domestic violence and sexual assault including its effects on victims and children;
- (2) societal attitudes toward domestic violence and sexual assault;
- (3) orientation in the services, structure, philosophy and history of the sponsoring agency;
- (4) safety planning and disaster plans;
- (5) first aid kit and fire extinguisher use;
- (6) confidentiality, to include verbal confidentiality whether inside or outside the home;
- (7) client rights; and
- (8) universal precautions.

(b) The program shall have policy and procedures mandating a minimum of four (4) hours annual training for safe home providers.

(c) Compliance with 75:15-13-27 shall be determined by:

- (1) Review of program's policy and procedures.
- (2) Review of program's training records.

**75:15-13-28. Personnel training, public education services [REVOKED]**

**75:15-13-29. Personnel training, Court Advocates**

(a) Prior to providing services, Court Advocates shall receive the prescribed orientation training, and training in the following:

- (1) protective orders (i.e., the requirements for obtaining an ex parte emergency protective order and permanent protective order and an understanding of what happens after a protective order is issued);

- (2) full faith and credit;
  - (3) the court process including safety planning during this time; and,
  - (4) at least three (3) hours of accompanied court time with a trained court advocate that includes observation of an ex parte emergency protective order hearing and a final protective order hearing.
- (b) Compliance with 75:15-13-29 shall be determined by:
- (1) Review of program's policy and procedures.
  - (2) Review of program's training records and other provided documentation of staff training.
  - (3) Review of personnel records.

**75:15-13-30. Personnel training, batterers intervention services [REVOKED]**

## **SUBCHAPTER 15. GOVERNING AUTHORITY**

### **75:15-15-1. Governing authority**

(a) The agency shall have a governing authority. In the instance of Native American programs, the tribal council may be the governing body.

(b) The governing authority shall establish, and function under, written by-laws. These bylaws shall minimally include:

- (1) Designation of regular quarterly meetings to be held in accordance with the Open Meeting Act;
- (2) Recording and retention of written minutes;
- (3) Eligibility criteria, selection, terms, responsibilities, power and duties of members;
- (4) Term limitations, removal and filling of vacancies;
- (5) Attendance policy;
- (6) Prohibition on staff serving as voting members of the governing authority, and
- (7) Establishment of a quorum.

(c) Compliance with 75:15-15-1 shall be determined by:

- (1) Documents of incorporation or registration as a business entity or documentation from the appropriate Tribal Council.
- (2) Review of the written by-laws.
- (3) Review of the governing authority's minutes.

**75:15-15-2. Governing authority, documentation of source of authority [REVOKED]**

### **75:15-15-3. Duties of the governing authority**

(a) The duties of the governing authority shall include, but are not limited to:

- (1) Approving all policy for the operation of the agency, and ensuring procedures for the implementation of policy are in place and enforced.

(2) Ensuring the agency operates in compliance with established agency policy, applicable state and federal law and administrative rules.

(3) Compliance with the by-laws of the governing authority.

(4) Ensuring all financial transactions and events requiring the approval of the governing authority are reviewed and authorized by the governing authority prior to any commitment by agency personnel.

(5) The selection, annual evaluation and continuance of retention of the executive director.

(6) Review and approve all contractual agreements.

(7) Review the program audit and certification reports from the VSU and approve all plans of correction.

(8) Oversee the financial administration of the program.

(b) Compliance with 75:15-15-3 shall be determined by a review of:

(1) by-laws and minutes of the meetings of the governing authority;

(2) posted, or otherwise distributed, written materials regarding decisions, and other notifications, of the governing authority;

(3) personnel meeting minutes of the program and its various divisions or geographical locations where applicable; and

(4) written evaluation, and any other documentation regarding the retention or selection or hiring, of the executive director.

#### **75:15-15-4. Governing authority, meeting minutes**

(a) Minutes of the governing authority shall be kept in written form; reviewed at the next following meeting; corrected if such is approved; and signed by the presiding or authorized officer or chairperson.

(b) Meeting minutes shall include, but are not limited to, recording of:

(1) the date, time and place of the meeting;

(2) names of those members attending;

(3) whether, or not, the meeting was convened; and if not why;

(4) approval of minutes from past meeting.

(5) topics and issues discussed and decisions reached;

(6) recording of motions and of votes on the motion; and

(7) time of adjournment.

(c) Compliance with 75:15-15-4 shall be determined by the review of the meeting minutes of the governing authority.

#### **75:15-15-5. Governing authority, orientation**

(a) A certified program shall provide a minimum of 2 hours orientation training to members of the governing authority which

includes, but is not limited to:

- (1) Program goals and services of each service component;
- (2) Program policy and procedures;
- (3) Underlying philosophy [OAC 75:15-1-1.1];
- (4) Confidentiality, to include verbal confidentiality whether inside or outside of the facility and client records;
- (5) Client rights and grievance procedure;
- (6) Legal and ethical issues;
- (7) Overview of domestic violence, sexual assault & stalking;
- (8) Open Meeting Act and recording of meeting minutes;
- (9) Open Records Act;
- (10) Rules, including standards and criteria, used in certifying programs;
- (11) Role and responsibility of the executive director; and
- (12) Role and responsibility of the governing authority.

(b) Orientation training shall take place within 90 days of election to the governing authority.

(c) Members of the governing authority providing volunteer direct or indirect services to clients shall receive the prescribed orientation and training required for program personnel in addition to the orientation set forth in this Section.

(d) Compliance with 75:15-15-5 shall be determined by a review of written policy and procedures, training materials, training records, and minutes of meetings.

## **SUBCHAPTER 17. CLIENT RIGHTS, DOMESTIC VIOLENCE, SEXUAL ASSAULT PROGRAMS AND SHELTERS**

### **75:15-17-1. Applicability**

This Part is applicable to those domestic violence, and sexual assault programs and shelters certified by the OAG pursuant to 74 O.S. § 18p-1 et seq.

### **75:15-17-2. Client right to information, refused services [REVOKED]**

### **75:15-17-3. Client rights**

(a) Each client shall have and enjoy all constitutional and statutory rights of all citizens of the State of Oklahoma and the United States, unless abridged through due process of law by a court of competent jurisdiction. Each program shall ensure each client has the rights which are listed below:

- (1) Each client has the right to be treated with respect and dignity. This shall be construed to protect and promote human dignity and respect for individual dignity.
- (2) Each client has the right to a safe, sanitary, and humane living environment.

(3) Each client has the right to a humane psychological environment protecting him or her from harm, abuse, and neglect.

(4) Each client has the right to an environment which provides reasonable privacy, promotes personal dignity, and provides opportunity for the client to improve her or his functioning.

(5) Each client has the right to receive services suited to her or his needs without regard to his or her race, religion, sex, ethnic origin, age, degree of disability, handicapping condition, legal status, or ability to pay for the services.

(6) Each client, on admission, has the absolute right to communicate with a relative, friend, clergy, or attorney, by telephone or mail, at the expense of the program if the client is indigent.

(7) Each client shall have and retain the right to confidential communication with an attorney, personal physician, or clergy.

(8) Each client has the right to uncensored, private communications including, but not limited to, letters and telephone calls. Copies of any personal letter, sent or received, by a client shall not be kept in her or his client record without the written consent of the client.

(9) No client shall be neglected or sexually, physically, verbally, or otherwise abused.

(10) Each client shall have the right to practice his or her own religious beliefs, and be afforded the opportunity for religious worship that does not infringe on the health or safety of others. No client shall be coerced into engaging in, or refraining from, any personal religious activity, practice, or belief.

(11) Each client has the right to be provided with prompt, competent, appropriate services and an individualized service plan.

(A) The client shall be afforded the opportunity to participate in her or his service plan.

(B) The client may consent, or refuse to consent, to the proposed services.

(12) The records of each client shall be treated as confidential.

(13) Each client has the right to refuse to participate in any research project or medical experiment without informed consent of the client, as defined by law. A refusal to participate shall not affect the services available to the client.

(14) Each client has the right to assert grievances with respect to any alleged infringement of these stated rights of clients, or any other subsequently statutorily granted

rights.

(15) No client shall ever be retaliated against, or subject to, any adverse conditions or services solely or partially because of having asserted her or his rights as stated in this section.

(16) Each client has the right to review his or her own records, or authorize his or her attorney or others to do so. However, where the program is providing the treatment of a mental health or substance abuse illness, the provisions of 43A O.S. § 1-109 and 42 CFR then apply. Each client also has the right that all information and records regarding him or her shall be treated as confidential.

(17) Each client has the right to know why services are refused and can expect an explanation concerning the reason he or she was refused certain services.

(b) Each client shall be given a copy of these rights and the provision of such shall be documented in the client record.

(c) Programs shall have written policy and procedures to ensure each client enjoys, and has explained to him or her, these rights; and these rights are visibly posted in client areas of the facility.

(d) The OAG, in any investigation or program monitoring regarding client rights, shall have unimpeded access to clients, program records and program staff.

#### **75:15-17-4 Client grievance policy and procedures**

(a) Each program shall have a written client grievance policy providing for, but not limited to, the following:

(1) Written notice of the grievance and appeal procedure provided to the client; and, if involved with the client, to family members or significant others;

(2) Time frames for the grievance policy's procedures, which allow for an expedient resolution of client grievances;

(A) Transitional living, shelter services, and safe home timeframes for resolution of grievances by program staff shall be seven (7) days unless appealed;

(B) Non-transitional living and non-shelter services' timeframes for resolution of grievances by program staff shall be fourteen (14) days unless appealed;

(3) Name(s) of the individual(s) who are responsible for coordinating the grievance policy and the individual responsible for or authority to make decision(s) for resolution of the grievance and the individual responsible for or authorized to make decisions for resolution of grievance. In the instance where the decision maker is the subject of a grievance, decision-making authority shall be delegated;

(4) Provide for notice to the client that he or she has a

right to make a complaint to the OAG Victims Services Unit.  
(5) Clients shall be given a copy of the grievance policy including the right to make a complaint to the OAG and the provision of such shall be documented in the client record;  
(6) Mechanism to monitor the grievance process and improve performance based on outcomes; and  
(7) Annual review of the grievance policy and procedures, with revisions as needed.