

TITLE 75. ATTORNEY GENERAL

Editor's Note: *"[A]ll functions, duties, contracts and responsibilities of the Oklahoma Human Rights Commission" were assumed by the Office of Civil Rights Enforcement upon its creation within the Office of the Attorney General on 7-1-12 [SB 763 (2011)]. For rules of the Human Rights Commission that were effective prior to 7-1-12, see OAC 335 in the 2011 Edition of the OAC.*

CHAPTER 1. ADMINISTRATION

[**Authority:** 74 O.S., Sections 18p-1 et seq.]
[**Source:** Codified 7-1-06]

SUBCHAPTER 1. GENERAL INFORMATION

75:1-1-1. Purpose

- (a) These rules are promulgated pursuant to the requirements of the Administrative Procedures Act, 75 O.S. § 250, et seq. The purpose of these rules is to effectively implement and enforce the provisions of Title 74 § 18p-1 *et seq.* of the Oklahoma Statutes. These rules supplement existing state and federal laws, and being duly promulgated, have the force and effect of law.
- (b) These rules govern formal proceedings of the Office of the Attorney General. Informal proceedings may be held as announced by the Office of the Attorney General or as agreed with any person.

[**Source:** Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-1-1.1. Definitions

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

"Certification" means a status which is granted to a program by the Oklahoma Attorney General, and indicates approval to provide a particular service. In accordance with the Administrative Procedures Act, 75 O.S. § 250.3(8), certification is defined as a "license."

"Certification report" means a written notice of the deficiencies developed by the Office of the Attorney General.

"Certified facility" means any facility which has received a certification status by the Oklahoma Attorney General.

"Conditional Certification" means a status which is granted to a program by the Oklahoma Attorney General, and indicates approval to provide a particular service or services for a specified period of time, typically four (4) months in order to give a renewal applicant an opportunity to achieve 100% compliance with applicable rules.

"Contractor" or **"contractors"** means any program under contract with the Office of the Attorney General for the provision of goods, products or services.

"Entities" or **"entity"** means sole proprietorships, partnerships, corporations, limited partnerships, limited liability partnerships, and limited liability companies.

"Facilities" or **"facility"** means entities as described in 74 O.S. § 18p-6 and Chapters 15, 25 and 30 in Title 75 of the Oklahoma Administrative Code, domestic violence shelters and programs, sexual assault programs, including programs serving adult victims of sex trafficking, and batterers intervention programs.

"Individual proceeding" means the formal process employed by an agency having jurisdiction by law to resolve issues of law or fact between parties and which results in the exercise of discretion of a judicial nature.

"Levels of performance" means a unit of service by types of service.

"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.

"Probationary certification" means a certification status granted for a period less than three (3) years.

"Program" means a domestic violence shelter, domestic violence program, sexual assault program, adult human sex trafficking program or batterers intervention program pursuant 74 O.S. § 18p-6.

"Reimbursement rates" means the rates at which all contractors are reimbursed (paid) for services they provide under their contract with the Office of the Attorney General, and which are reported to the Office of the Attorney General as required.

"Respondent" means the person(s) or entity(ies) named in a petition for an individual proceeding against whom relief is sought.

"Site Review Protocol" means an Office of the Attorney General internal document used by the Office of the Attorney General Victims Advocacy and Services Unit staff as a work document in the certification site visit(s) that is based primarily upon the rules (standards/criteria) being reviewed. The Site Review Protocol is used in preparing the Certification Report, which is provided to the facility, and in preparing recommendations regarding certification to the Attorney General for his or her consideration and action.

"Temporary Certification" means a status which is granted to a program by the Oklahoma Attorney General, and indicates approval to provide a particular service or services for one (1) year in order to give an initial applicant an opportunity to achieve 100% compliance with applicable rules.

"Units" or **"unit"** means an hour, or part of an hour, or group of hours, or a 24-hour day during which a specific service is rendered.

"Victims Advocacy and Services Unit" or **"VASU"** means the Unit created within the Office of the Attorney General to provide services for persons who require domestic violence or sexual assault services through a domestic violence program, sexual assault program, including programs serving adult victims of sex trafficking, or batterers intervention program.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 38 Ok Reg 1689, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-2. Applicability

This, and all subsequent chapters are applicable, unless otherwise specifically noted in a chapter, subchapter, part or section of Oklahoma Administrative Code Title 75, to the Office of the Attorney General, and all facilities under contract with the Office of the Attorney General and/or subject to certification by the Office of the Attorney General (74 O.S. § 18p-6).

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-1-3. Compliance with laws and rules

- (a) Any statute of the United States, or of the State of Oklahoma now existing, or duly enacted in the future, shall supersede any conflicting provision of the rules of this and all subsequent chapters to the extent of such conflict, but shall not affect the remaining provisions therein.
- (b) All persons and organizations affected by the rules of this and all subsequent chapters and related laws shall be knowledgeable of the conduct pertinent in operating in accordance with all such rules and laws.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-1-4. Organization

- (a) The Oklahoma Attorney General is vested with the authority to make rules for the implementation of the Office of the Attorney General's statutorily mandated and permissible functions related to domestic violence programs, sexual assault programs, programs serving adult victims of sex trafficking, and/or batterers intervention programs under 74 O.S. §§ 18p-6.
- (b) The Oklahoma Attorney General shall maintain such staff as authorized by law and assign said staff to carry out the duties and responsibilities required to fulfill the statutory requirements of 74 O.S. §§ 18p-1 et seq., and the rules and directives of the Oklahoma Attorney General.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-5. Objectives

The objectives of the Oklahoma Attorney General are as follows:

- (1) The provision of quality domestic violence, sexual assault, adult human sex trafficking and batterers intervention services, within the resources available, to those persons, and their families, receiving services from the facilities, certified by and/or

under contract with the Office of the Attorney General.

(2) The services by domestic violence and sexual assault providers, and adult human sex trafficking shall be rendered in an environment of safety, dignity and with respect to the rights of those persons and their families.

(3) Adherence to and compliance with applicable state and federal statutes, including but not limited to Title 74 §§ 18p-1 *et seq.* of the Oklahoma Statutes and the Public Health Services Act (42 U.S.C.) by all facilities operated by, under contract with, and certified by the Oklahoma Attorney General.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-6. Public records

(a) **Official records.** Official records of the Office of the Attorney General include, but are not limited to, information, rules, forms, the record in individual proceedings, records submitted to the Office of the Attorney General, and other public records in accordance with the Oklahoma Open Records Act ("ORA"), 51 O.S. § 24A.1, *et seq.*

(b) **Copies.** Copies of official records of the Office of the Attorney General, not privileged or protected from production by law, shall be available to the public.

(c) **Submitting a Open Records Act Request.** Requests for copying, inspection, or printing [mechanical reproduction] of records must be submitted in writing to the Office of the Attorney General. Requests may be submitted by email to openrecordsrequest@oag.ok.gov or mailed to the office at 313 NE 21st St., Oklahoma City, OK 73105.

(d) **Inspection of records.** Due to the sensitive nature of files and records held by the Office of the Attorney General, the office strongly prefers to provide copies or printouts of records requested in lieu of inspection.

(e) **Fees.** The Office of the Attorney General maintains a fee schedule filed with the County Clerk of Oklahoma County, Oklahoma as required by section 24A.5 of the ORA. The fee schedule is available on the office's website. Subject to any Open Records Act limitations, commercial requests or those that would cause excessive disruption of office function, such as documents that are archived, either internally or with the Oklahoma Archives and Records Commission, a search fee will be charged based upon the hourly rate of the individual(s) searching for, and locating, the requested records in accordance with the fee schedule. The office reserves its right to elect to not charge fees or waive any fees when it believes that the public interest outweighs an excessive disruption to the office's functions.

(f) **Confidential records of domestic violence program, sexual assault program, and programs serving adult victims of sex trafficking.** Such records are confidential and not subject to release by federal and state law, federal regulations, and state administrative rules including, but not limited to, title 74, sections 18p-3 and 18p-8 of the Oklahoma Statutes, 42 U.S.C. § 10406, and 42 C.F.R. § 1370.4.

(g) **Office of the Attorney General Personnel Records.** Subject to the sole discretion of the Office of the Attorney General, certain employee personnel records are confidential and not subject to the ORA, including employee evaluations, payroll deductions, applications submitted by persons not hired by the Office of the Attorney General. Internal personnel investigations including examination and selection material, employees' home addresses, telephone numbers, and social security numbers, medical and employee assistance records, and other personnel records where disclosure would constitute a clear invasion of privacy are also kept confidential. Personnel information that is subject to release includes the application of a person who becomes an employee of the Office of the Attorney General, gross receipt of public funds, dates of employment, title or position and any final disciplinary action resulting in loss of pay, suspension, demotion or termination.

(h) **Privileged and confidential records.** Any other document protected, as privileged confidential, by any Oklahoma or federal law, or Oklahoma or federal administrative rule, or by order of a court of competent jurisdiction, may be exempt from production or kept confidential under the ORA.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-7. Requests for agency public information [REVOKED]

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-8. Forms

In order to maintain efficiency and uniformity in the administration of duties, the Office of the Attorney General will devise and maintain forms for use by any party. The forms may be revised periodically to ensure uniformity, efficiency, and expediency. The prescribed forms must be used by all affected parties unless another form is approved by the Office of the Attorney General prior to its submission, or other provisions are stated in subsequent chapters. Additionally, forms may be acquired by request under 75:1-1-7.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-1-9. Procedures to secure a declaratory ruling as to the applicability of any rule or order of the Office of the Attorney General

(a) Any person subject to the rules contained in this title may petition for a declaratory ruling as to the applicability of a specific rule and its effect on petitioner. In petitioning the Office of the Attorney General for a declaratory ruling, the following procedures must be followed:

- (1) The petition must be in writing and submitted by email to rules@oag.ok.gov to the Attorney General with attention to the Office of General Counsel;

- (2) The petition shall state with specificity the rule in question;
 - (3) The petition shall state clearly and with specificity the basis for the action and the action or relief sought;
 - (4) The petition shall pose the specific question(s) to be answered by the Office of the Attorney General; and
 - (5) The petitioner or petitioner's authorized representative shall print his or her name, address and telephone number on the petition and sign it.
- (b) The petition will be stamped upon receipt by the Office of the Attorney General to show the date of submission. The petition shall be referred to the Office of General Counsel to make a recommendation to the Attorney General, who shall issue a ruling within 30 days from the date of submission.
- (c) The petitioner shall be notified of the declaratory ruling in writing by the U.S. Mail, certified mail, return receipt requested.
- (d) The ruling shall become final unless, within 15 days of receipt, the petitioner files with the Office of General Counsel a written request for a hearing before the Attorney General. If the petitioner requests such a hearing, the matter shall be set to be heard by the Attorney General.
- (e) At the hearing of the matter by the Attorney General, the petitioner and the Office of General Counsel shall be permitted to present oral argument to the Attorney General, the length of which shall be limited by the Attorney General. At the conclusion of the presentation of the matter, the Attorney General shall render a decision on the petition and a written decision shall follow within 15 days.
- (f) A declaratory ruling or refusal to issue such ruling, shall be subject to judicial review in the manner provided for review of decisions in individual proceedings in the Oklahoma Administrative Procedures Act (75 O.S. § 307).

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-1-10. Procedures to petition the Office of the Attorney General to promulgate, amend or repeal a rule

Any person affected either by a rule adopted and promulgated by the Attorney General, or the lack of a rule and regulation may petition the Attorney General to promulgate, adopt, amend or repeal a rule pursuant to 75 O.S. § 305 and in accordance with this section.

- (1) The petition must be in writing and submitted to the Office of General Counsel, Office of the Attorney General:
 - (A) The proposed amendment, promulgation, or repeal of a specific rule.
 - (B) The reason for the petition to repeal, promulgate, or amend a rule.
 - (C) The effect that the repeal, amendment or promulgation of the rule would have on the petitioner.
- (2) The petitioner must print his or her name, address and telephone number on the petition and it must be signed by the petitioner.

(3) The Office of the General Counsel shall timely respond to such petition, either by recommending to the Attorney General that rulemaking proceedings be initiated or that the petition be denied.

(4) The petitioner will be notified by regular mail if rulemaking proceedings are initiated.

(5) A petition for rulemaking will be deemed denied if the Office of the Attorney General has not initiated rulemaking proceedings within thirty (30) calendar days after the petition is submitted.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 38 Ok Reg 1689, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 3. CONTRACTS FOR DOMESTIC VIOLENCE AND SEXUAL ASSAULT SERVICES

PART 1. ELIGIBILITY TO CONTRACT

75:1-3-1. Purpose

The purpose of this Part is to delineate the criteria for eligibility for programs to contract with the Office of the Attorney General for the provision of domestic violence, sexual assault, and adult human sex trafficking services to the public as permitted or required under Title 74 O.S. § 18p-1 *et seq.*

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-3-2. Applicability

This part is applicable to all entities presently under contract with the Office of the Attorney General to provide domestic violence, sexual assault, and adult human sex trafficking services; and to all programs which may either be, or desire to be, considered for such contracts.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-3-3. Criteria for eligibility to contract

The criteria for eligibility to contract with the Office of the Attorney General are as follows:

(1) The entity shall exist in conformity with Oklahoma Statutes regulating said entity, and provide such proof. In addition, if said entity purports to be a not-for-profit corporation, the proof of exemption from federal taxes under the U.S. Internal Revenue Service Code shall be made.

(2) Revocation, denial or non-renewal of an entity's certification by the Attorney General shall result in contract termination for any service requiring such certification as of the date of the Attorney General's action.

(3) The facility shall have deficiencies of no more than 30% of the standards on which the facility is reviewed.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08]

PART 3. CONTRACTS AND CONTRACTING PROCESSES

75:1-3-14. Purpose

The purpose of this Part is to describe the contracts and contracting processes of the Office of the Attorney General for the provision of domestic violence, sexual assault, and adult human sex trafficking services to the public.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-3-15. Applicability

This Part is applicable to all entities presently under contract to provide domestic violence, sexual assault, and adult human sex trafficking services, and to all entities which may either be, or desire to be, considered for such contracts.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-3-16. Contract forms

Contracts are in a standardized form and format as determined by the Office of the Attorney General which may be revised from time-to-time to meet changing state and federal statutes and regulations, and the requirement of the Office of the Attorney General to fulfill its functions and responsibilities.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-3-17. Competitive bidding

With regard to competitive bidding:

(1) Contracts which are not based upon fixed uniform rates shall be competitively bid unless said contract is exempt from competitive bidding or meets the requirements for sole source justification.

(2) Contracts based upon fixed uniform rates, which have been previously approved by the Office of Management and Enterprise Services, set by the Attorney General, are not subject to competitive bidding [74 O.S. § 85.7 (11)].

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 33 Ok Reg 1194, eff 9-11-16]

75:1-3-18. Contract, services performance

Contracts shall require performance of specific service(s) to be performed. Where the services cannot be broken down into units, specifically measurable and reviewable services shall be stated. Additionally, contracts may contain requirements of performance based upon measurable quality outcome indicators.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-3-19. Contract renewal

(a) Contracts for domestic violence, sexual assault, and adult human sex trafficking services are considered during the third (3rd) and fourth (4th) quarter of the state fiscal year, for contracting in the following fiscal year.

(b) Consideration for renewal shall include a review of performance of the current contract including, but not limited to, measurable outcome indicators, target populations served, levels of performance of specific services, having deficiencies of no more than 30% of the standards reviewed, the existence of any client rights violations, and cost effectiveness of the delivery of services.

(c) If the Attorney General determines the contractual relationship shall be renewed, it shall be in a new contract for the upcoming fiscal year and may or may not contain the same terms, conditions, form and format as the previous contract.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-3-20. Contractor reimbursement rates

Reimbursements to contractors for domestic violence, sexual assault, or adult human sex trafficking services shall be considered and set in the manner described as follows:

(1) Contractors shall annually, or as otherwise prescribed, submit to the Chief of the Victim Advocacy and Services Unit a uniform cost report in the form and format determined by the Office of the Attorney General, and within time-frames established by the Office of the Attorney General.

(2) Appropriated funds will be distributed according to a formula recommended by the VASU Advisory Council and approved by the Attorney General.

(3) The VASU Chief shall review and analyze these cost reports, requesting where deemed necessary the submission of supporting clarifying information within fifteen (15) days of said request.

(4) The VASU Chief may recommend to the Attorney General fixed uniform rates for services, taking into consideration variables such as average costs, appropriate inflationary factors, capitation methods, performance outcome measures, staff credentials and available funding.

(5) Prior to approval by the Attorney General of the proposed rates or changes to existing rates, VASU shall provide written

notice of an open hearing on the proposed fixed rates to each applicable contractor of record.

(6) Consideration of the proposed fixed rate by the Attorney General shall not occur until the Director of the Office of Management and Enterprise Services has been provided with, pursuant to 74 O.S. § 85.7:

(A) Thirty (30) days written notice of the meeting in which the Attorney General will consider the uniform rates of reimbursement;

(B) A copy of the meeting agenda item(s) concerning the proposed rate(s); and

(C) All supporting documentation and materials regarding the reimbursement rates being proposed.

(7) The Attorney General shall, at the meeting referenced in (6) (A) and (B) of this section, separately consider each proposed fixed and uniform rate of reimbursement. These rates, if adopted, shall then take effect on a date determined by the Attorney General when the rates are considered for adoption; and remain in effect until subsequent action by the Attorney General.

(8) All revisions shall be examined, proposed, considered and adopted pursuant to this section.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 33 Ok Reg 1194, eff 9-11-16 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 38 Ok Reg 1689, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 5. PROCEDURE IN INDIVIDUAL ADMINISTRATIVE PROCEEDINGS

75:1-5-1. Individual proceedings

Article II of the Administrative Procedures Act ("APA"), 75 O.S. § 308a, *et seq.*, governs individual proceedings by Office of the Attorney General for revocation, denial, suspension and non-renewal of certification or for reprimand of certified facilities.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-2. Persons affected by individual actions

The Attorney General may bring an individual proceeding against any program certified by the Attorney General for violation of Title 74 O.S § 18p-1 *et seq.* or the rules of the Attorney General as set forth in Title 75 of the Oklahoma Administrative Code.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 35 Ok Reg 858, eff 9-14-18]

75:1-5-3. Types of sanctions

The following administrative sanctions may be taken against a Respondent:

- (1) Revocation of certification
- (2) Reduction in certification
- (3) Suspension of certification
- (4) Reprimand

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-4. Petition and notice in individual proceedings

(a) **Petition and Notice.** In the event the Attorney General determines action should be taken, an individual proceeding may be initiated pursuant to the APA by filing a petition and notice with a Hearing Officer, as designated by the Attorney General, for the matter, and by serving the petition on all respondents. The petition and notice shall include a statement of the legal authority and jurisdiction under which the action is taken, reference to the statutes and rules involved, a short and plain statement of the matters asserted and the relief requested. The petition may allege facts by attaching and incorporating a document by reference. The petition and notice shall provide that the action shall commence and become effective fifteen (15) calendar days after receipt of said notice by the Respondent, unless the Respondent timely files a written request for a hearing with the Office of the Attorney General.

(b) **Request for hearing.** A request for hearing will be timely filed if said request is in writing and postmarked or hand delivered to the Hearing Officer within fifteen (15) calendar days of the date the party received the petition and notice. If a timely written request for a hearing is not filed by the Respondent, the allegations in the petition shall be deemed confessed by the Respondent and the action will become final as set forth herein. If the written request for hearing is timely filed, such hearing shall be scheduled before the Attorney General or Hearing Officer at least fifteen (15) days from the date said request is filed, and the parties shall be notified of the date, time and place of the hearing. If an emergency exists, a hearing may be conducted without the filing of a petition and without waiting fifteen (15) days.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency)¹; Added at 23 Ok Reg 2189, eff 7-1-06]

Editor's Note: ¹*Two different rules were promulgated at this Section number (75:1-5-4) in the emergency action published at 23 Ok Reg 329, effective 11-8-05. On 7-1-06, the second emergency rule, called "Continuances," was superseded by a permanent rule numbered at a different number, 75:1-5-5.4.*

75:1-5-5. Service of petition and notice

(a) **Service.** The petition and notice shall be served on the Respondent(s) personally or by certified mail, return receipt requested to the address of the respondent(s) on file with the Office of the Attorney General.

(b) **Proof of service.** Proof of service shall be filed with the Hearing Officer.

(c) **Substitute service.** If the Office of the Attorney General is unable to obtain service on a Respondent, the petition and notice shall be mailed by regular mail to the last known address of the Respondent. The Office of the Attorney General shall file an affirmation service was attempted which will be deemed as proof of service.

(d) **Service of other papers and documents.** Service of all other papers and documents connected with an individual proceeding shall be served on the parties or their counsel by delivering a copy or via regular mail or facsimile.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency)¹; Added at 23 Ok Reg 2189, eff 7-1-06]

Editor's Note: ¹*Two different rules were promulgated at this Section number (75:1-5-5) in the emergency action published at 23 Ok Reg 329, effective 11-8-05. On 7-1-06, the second emergency rule, called "Discovery," was superseded by a permanent rule numbered at a different number, 75:1-5-5.5.*

75:1-5-5.1. Emergency actions

When the Attorney General or Hearing Officer finds that the public health, safety or welfare requires action be taken immediately and when such a finding is incorporated in an order, emergency action or summary suspension of a certification may be ordered pending the filing of a petition or the outcome of an individual proceeding.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-5.2. Procedures in individual proceedings generally

The order of procedure in all individual proceedings shall generally be governed by the APA.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-5.3. Prehearing conference

A pre-hearing conference may be ordered and scheduled by the Attorney General or the Hearing Officer on his or her own motion or upon the request of any party. The Attorney General or Hearing Officer may authorize the conference to occur by teleconference. The subjects and objectives of the pre-hearing conference shall be similar to those for pretrial proceedings in district courts.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-5.4. Continuances

(a) **Continuance by the Office of the Attorney General.** The Attorney General or the Hearing Officer may continue or adjourn the proceedings at any time for a specified time, with notice or motion.

(b) **Continuance by motion of parties.** Except for good cause shown, or by agreement of all parties, no continuance will be granted upon

motion of a party unless written request therefore is filed and served on all parties of record and filed with the Hearing Officer at least seven (7) days prior to the date set for hearing. A stipulation for continuance among all parties of record ordinarily will be approved, unless the Attorney General or the Hearing Officer determines that the public interest requires otherwise.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-5.5. Discovery

(a) **Purpose.** Discovery is designed to enable a party to obtain relevant information needed for presentation of the party's case. This section is intended to provide a simple method of discovery.

(b) **Explanation.** Discovery is a process apart from the hearing whereby a party may obtain information from another person which has not otherwise been provided. This information is obtained for the purpose of assisting the parties in developing, preparing and presenting their cases.

(c) **Methods.** Discovery shall be conducted generally in accordance with Section 315 of the APA. Additionally, the Attorney General or the Hearing Officer may enter specific orders directing the conduct of discovery.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-6. Protective orders

(a) The Attorney General or the Hearing Officer at the hearing or at anytime upon application of a party, with or without notice, may make such orders relating to discovery as may be necessary or appropriate for the protection of the parties, and to prevent hardship to and excessive burden upon a party. Such orders may, among other subjects, limit the scope of depositions, prohibit questions or subjects of inquiry, require or excuse answers to questions on deposition, limit or excuse, in whole or in part, production of documents and shorten or extend the time within which any act shall be performed. Disclosure of client identification shall only be ordered pursuant to state and federal law.

(b) The Attorney General or the Hearing Officer may make appropriate orders, including dismissal of a proceeding or denial of relief, as may be warranted for failure or refusal to comply with an order issued pursuant to this rule.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-7. Subpoenas

(a) **Issuance and service.** Subpoenas for the attendance of witnesses, the furnishing of information and the production of evidence shall be issued by the Hearing Officer upon request by a party. As an officer of the court, an attorney authorized to practice law in Oklahoma may also issue and sign subpoenas. Filing a formal request for the issuance of subpoenas shall not be required. Subpoenas shall be served and a return made in the same manner as provided in the Oklahoma Pleading Code, 12 O.S. § 2004.1.

(b) **Failure to obey.** The Attorney General or the petitioner may seek an appropriate judicial proceeding to compel compliance by persons who fail to obey a subpoena, who refuse to be sworn or make an affirmation at a hearing or who refuse to answer a proper question during a hearing. The hearing shall proceed despite any such refusal but the Attorney General or the Hearing Officer may, in his discretion at any time, continue the proceedings as necessary to secure a court ruling.

(c) **Motions to quash.** Any person to whom a subpoena is directed, may file a motion to quash or limit the subpoena with the Hearing Officer, setting forth the reasons why the subpoena should not be complied with or why it should be limited in scope and the Attorney General or Hearing Officer will rule on the motion.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-8. Conduct and record of hearing

(a) **Open to public.** Every hearing before the Office of the Attorney General shall be conducted by the Attorney General or designated Hearing Officer. All hearings shall be open to the public unless a protective order is entered to uphold confidentiality laws; however, upon motion of a party to the proceeding, the Attorney General or the Hearing Officer may exclude from the hearing room any witness not at that time under examination. A party to the proceeding and that party's attorney may not be excluded.

(b) **Record.** All testimony shall be taken on the record unless otherwise designated by the Attorney General or the Hearing Officer. An electronic recording of the hearing proceedings shall be made. The recording will not be transcribed as a matter of course. The electronic recording of the Office of the Attorney General shall be the official record. Copies of the recordings shall be provided to a party on written request. The cost of transcription, if done, shall be borne by the party having the recording transcribed.

(c) **Court reporter.** A party may have the proceeding transcribed by a court reporter at the expense of the party. Each party requesting copies shall make arrangements for such with the reporter, and pay the costs.

(d) **Maintenance of the record.** The record of a proceeding and the file containing the notices and the pleadings will be maintained by the Attorney General or the Hearing Officer in a location designated by the Attorney General or the Hearing Officer. All pleadings, motions, orders and other papers submitted for filing in an individual proceeding shall be stamped with the date filed by the Attorney General or the Hearing Officer upon receipt.

(e) **Designation on appeal.** On an appeal to district court, the parties may designate and counter-designate portions of the record to save costs, following the procedures in the APA.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-9. Hearing officers

(a) **Exercise of authority.** The Attorney General shall appoint at least one individual who is a licensed attorney to act as the Administrative Hearing Officer in individual proceedings filed before the Office of the Attorney General. The Administrative Hearing Officer shall conduct fair and impartial hearings and take all necessary action to avoid delay in the disposition of all proceedings. He or she shall have all powers necessary to that end unless otherwise limited by law, including but not limited to, the authority to:

- (1) Administer oaths and affirmations;
- (2) Rule upon objections and offers of proof and receive relevant evidence;
- (3) Rule upon the institution of discovery procedures as appropriate;
- (4) Convene a hearing as appropriate, regulate the course of the hearing, examine any witness in order to clarify issues; maintain decorum and exclude from the hearing any disruptive persons;
- (5) Exclude from the hearing any witness whose later testimony might be colored by testimony of other witnesses or any person whose presence might have a chilling effect on testifying witnesses;
- (6) Rule on all motions, witness and exhibit lists, exhibits and proposed findings;
- (7) Require the filing of memoranda of law and the presentation of oral argument with respect to any question of law;
- (8) Order the production of evidence and the appearance of witnesses whose testimony would be relevant, material and non-repetitious;
- (9) Make inquiries of the parties or witnesses for the purpose of clarification or fact findings to ensure a fair and impartial decision;
- (10) Render decisions pursuant to the particular action taken;
- (11) May require, or allow, the filing of briefs by the parties, and may designate the order and time for filing briefs and reply briefs;
- (12) Close the record when all interested parties have had the opportunity to be heard and to present evidence; and
- (13) Issue proposed final orders.

(b) **Disqualification of hearing officer.**

- (1) The Administrative Hearing Officer shall withdraw from any individual proceeding in which he or she cannot accord a fair and impartial hearing or consideration, stating on the record the reasons therefore, and shall immediately notify all parties of the withdrawal.
- (2) Any party may file a motion requesting the Administrative Hearing Officer withdraw on the basis of personal bias or other disqualification and specifically setting forth the reasons for the request. This motion shall be filed as soon as the party has reason to believe there is a basis for the disqualification. The Administrative Hearing Officer shall rule on said motion.

75:1-5-10. Order of hearing

(a) **Appearances and default.** At the hearing, every party shall announce an appearance. An individual may appear on their own behalf or be represented by an attorney. A corporation must be represented by counsel. Any Respondent who fails to appear as directed, after service of the petition and notice of hearing as provided by these rules, may be determined to have waived the right to appear and present a defense to the allegations contained in the petition, and the Hearing Officer may default the party and issue an order sustaining the allegations.

(b) **Preliminary matters.** The following shall be taken up prior to receiving evidence:

(1) The Office of the Attorney General and other parties may offer preliminary exhibits, including pleadings necessary to present the issues to be heard.

(2) Ruling shall be made on any pending motions, including requests for delivery of documents.

(3) Stipulations of fact and stipulated exhibits shall be received.

(4) Parties shall make opening statements where appropriate.

(5) Any other preliminary matters appropriate for disposition prior to offers of evidence.

(c) **Rules of evidence.** The rules of evidence shall be those specified by the APA.

(d) **Presentation of the case.** At the hearing, each party may make a brief opening statement, present witnesses and exhibits, cross-examine adverse witnesses, and make closing arguments.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-11. Order

(a) **Issuance and services of final order.** Not more than twenty (20) calendar days after conclusion of the hearing, the Hearing Officer shall issue a proposed order with findings of fact and conclusions of law. If the Office of the Attorney General proves its allegations in the petition and notice by clear and convincing evidence, the Attorney General shall issue an order sustaining the allegations. If the Office of the Attorney General does not meet its burden, the Attorney General shall issue an order in favor of the respondent(s). The Attorney General shall file and serve the final order on respondent(s) by certified mail, return receipt requested.

(b) **Appeal.** A party may appeal a Final Order as provided in the APA.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-5-12. Settlement

Unless precluded by law, individual proceedings may be resolved by agreed settlement or consent order, with the concurrence of the Office of the Attorney General or the Hearing Officer.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

SUBCHAPTER 7. CERTIFICATION AND DESIGNATION OF DOMESTIC VIOLENCE PROGRAMS, SEXUAL ASSAULT PROGRAMS, INCLUDING PROGRAMS SERVING ADULT VICTIMS OF SEX TRAFFICKING, AND BATTERERS INTERVENTION PROGRAMS

75:1-7-1. Applicability of certification

This subchapter applies to all entities which are subject to certification by the Attorney General as set forth in 74 O.S. § 18p-6.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-7-2. Purpose of certification

The purpose of certification is to assess a facility's responsibility to the client, and delivery of acceptable services to the client. Responsibility to the client is demonstrated through the provision of suitable facilities, trained staff and needed services which are accessible, safe and confidential. In addition to the above is the demonstration of the willingness and ability of the governing authority and staff to provide the planning, budgeting and management of resources necessary to the continued existence and effectiveness of the facility/services.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-7-3. Reviewing authority

The Attorney General shall certify domestic violence shelters, domestic violence programs, sexual assault programs, adult human sex trafficking programs, or batterers intervention programs and direct that such shall be carried out as stated in this subchapter.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11 ; Amended at 35 Ok Reg 858, eff 9-14-18]

75:1-7-4. Certification of facilities and programs and individuals

Certification requires compliance with applicable Standards and Criteria as set forth in Chapter 15, Chapter 25 and/or Chapter 30 of OAC Title 75 regulating Standards and Criteria for Domestic Violence Programs, Sexual Assault Programs, including programs serving Adult Victims of Sex Trafficking, and Batterers Intervention Programs.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Revoked and reenacted at 28 Ok Reg 1903, eff 7-11-11]

75:1-7-5. Procedures for application for certification

(a) Applications for certification as a domestic violence shelter or program, sexual assault program, including programs serving adult victims of sex trafficking, or batterers intervention program must be made to the Office of the Attorney General in writing on a form and in a

manner prescribed by the Attorney General and include the following:

- (1) A fully completed application for certification form signed by authorized officials;
- (2) The necessary written documentation or supporting evidence required on the application for certification form; and
- (3) The required certification fee(s) in the form of a check or money order, payable to the Office of the Attorney General.

(b) The following fees are required of Applicants for domestic violence shelters, domestic violence programs, sexual assault programs, adult human sex trafficking programs, and batterers intervention programs. For every program seeking approval, the applicant shall submit \$150.00 for each initial application and \$150.00 for each renewal application. Fees paid by applicants are not refundable.

(c) The application for certification form, required written documentation and fee(s) must be submitted to the Office of Attorney General, Victims Advocacy and Services Unit.

(d) The application requires specification of all services provided by the applicant, as well as information about the applicant including but not limited to governing authority, administrative, fiscal, all locations or sites where applicant will provide services and types of services to be provided.

(e) If, after being certified, a program desires to change the program name, program location, program delivery location or provide services at a new or different location maintained and operated by the certified program, or change its current office location, the facility must submit an application on a form and in a manner prescribed by VASU, the required documentation and fee, if any. Approval may be granted by the Attorney General upon submission of the required application and documentation to the VASU. Before constructing a new facility, the program shall consult with the OAG for review and recommendations regarding victim safety and confidentiality. Approval from the Attorney General must be obtained prior to providing services at the new location. The VASU may conduct a visit of the facility in accordance with section 8 of this subchapter.

(f) If, after being certified, a program desires to provide services at a public facility maintained for or used by the people or community, the certified program must notify VASU in writing of the name and location of the public facility and the type of service(s) offered. Additionally, the certified program must assure that the facility provides the necessary safety, confidentiality, and privacy of individuals being served. Approval may be granted by the Attorney General upon submission of the required documentation to VASU. Approval from the Attorney General must be obtained prior to providing services at the new location.

(g) If after being certified, a program desires to offer a new type of service, the facility must submit an application for certification, the required documentation and fee to VASU prior to providing a new service. Failure to become certified prior to providing services shall be grounds for injunctive relief pursuant to 74 O.S. § 18p-7.

75:1-7-6. Procedures for completion of certification process

(a) **Certification process.** Completion of the certification process will be done in cooperation between the applicant and certification team established and assigned by VASU, and consists of:

- (1) a review of all application materials;
- (2) a site review of the facility and completion of the applicable site visit protocol;
- (3) a review of all applicable records;
- (4) preparing certification reports for applicants;
- (5) reviewing and approving any needed plans of correction;
- (6) follow-up site reviews; and
- (7) presentation by VASU staff of the review results and associated recommendations to the Attorney General.

(b) **Initial applications.** All initial applications for certification shall be reviewed for completeness by VASU staff. If the application is deemed complete, site review of the facility or program will be scheduled. Based on the initial site review findings, the applicant shall achieve a minimum score of seventy percent (70%) of the applicable standards and rules. If the minimum score is not achieved, a plan of correction will not be requested and a notice of denial of the certification application shall be sent to the applicant by the Attorney General. In such case, re-application may not be submitted until a minimum of three (3) months have passed following the issuance of the notification of denial.

(c) **Length of certification process.** If an applicant for initial certification fails to achieve full certification within one (1) year of being granted temporary certification, the applicant shall not receive certification and a recommendation of revocation of the existing certification will be made to the Attorney General. In such case, re-application for certification shall be made in accordance with the requirements of sections 6 and 11 of this subchapter. If the applicant requests withdrawal of the certification status because of the circumstances cited above, the applicant may reapply three (3) months after acknowledgement by the Office of Attorney General that the application has been withdrawn.

(d) **Renewal applications.**

- (1) The VASU will, prior to the renewal date, notify facilities the application for renewal of certification is due.
- (2) The program shall submit its application for renewal within sixty (60) days before the expiration of its certification.
- (3) Renewal applications for certification shall be reviewed for completeness by Victims Advocacy and Services Unit staff. If the facility does not achieve the minimum score of seventy percent (70%) compliance with the applicable standards and rules based on the site review findings, a plan of correction will not be requested and revocation of the certification status will be recommended to the Attorney General.
- (4) If, after being granted conditional certification, an applicant for renewal fails to achieve full certification within four (4) months, the applicant shall not receive full certification and a recommendation of revocation of the certification status will be

made to the Attorney General.

(e) **Site reviews.**

(1) Initial, renewal or follow-up site reviews, based on the current certification status of the applicant, will be scheduled by designated representatives of the VASU at each location or site of the applicant. The review will be conducted by the assigned certification team or a certification team member.

(2) The follow-up site review(s) to Conditional Certification will be conducted to review implementation of the plan of correction to ensure cited deficiencies have been corrected or to demonstrate continued correction and compliance with the previously cited deficiencies. Failure to comply with applicable rules and implement the plan of corrections shall result in a recommendation that Certification be denied and Conditional Certification status be revoked.

(3) The follow-up site visit(s) to Temporary Certification will be conducted on standards not applicable during the initial certification visit, implementation of the plan of correction to ensure cited deficiencies have been corrected or to demonstrate continued correction and compliance with the previously cited deficiencies, and a review of a minimum of five (5) records. Failure to comply with applicable rules and implement the plan of correction shall result in a recommendation that Certification be denied and Temporary Certification status be revoked.

(4) A Site Review Protocol shall be completed during each site visit. Protocols shall contain the current Standards and Criteria applicable to the facility.

(A) A facility must be prepared to provide evidence of compliance with each applicable standard.

(B) In the event the reviewer(s) identifies some aspect of facility operation that adversely affects client safety, confidentiality or health, the reviewer(s) shall notify the facility director and appropriate VASU staff. An immediate suspension of certification may be made by the Attorney General.

(f) **Deficiencies.** A deficiency shall be cited for a failure to comply with the weighted value of each rule.

(g) **Report to applicant and plan of correction.**

(1) During the course of the certification process, and prior to determination of certification status, VASU staff shall report the results of the site review to the facility. The facility shall receive written notice of the deficiencies in a Certification Report.

(2) The facility must submit a written plan of correction for each deficiency for approval within two (2) weeks of the receipt of the Certification Report. Approval of the plan of correction shall be required before the completed application for certification will be presented to the Attorney General. Failure to submit the required plan of correction within two (2) weeks of the receipt of the Certification Report may result in denial of the certification application. In such case, re-application will be accepted after three (3) months from the date of issuance of the notification of

denial from the Attorney General. However, if the facility does not achieve the minimum score of seventy percent (70%) compliance with the applicable standards and rules based on the initial site review findings, a plan of correction will not be requested, and the application will be denied.

(h) Notification of Victims Advocacy and Services Unit recommendation for certification.

- (1) After completion of the site review and report on the Application for Certification, VASU staff shall prepare a recommendation on the certification status or application for the Attorney General.
- (2) Prior to the VASU staff's presentation of its recommendation of an applicant's certification to the Attorney General, the VASU staff shall notify the applicant of the recommendation.
- (3) Achievement of certain scores is a prerequisite for consideration of a specific certification status but may not be the sole determinant. Individual deficiencies that meet the criteria in section 9 of this subchapter may be grounds for suspending or revoking certification or denying applications for certification.
- (4) Consideration of certification may be deferred while additional information regarding a facility's compliance status is reviewed.
- (5) The minimum compliance scores for recommendation of a certification status to the Attorney General are:

- (A) **Certification with Commendation.** Facility is in compliance with 100% of the applicable rules.
- (B) **Certification.** Facility achieves compliance with 100% of the applicable rules after on-site correction(s).
- (C) **Conditional Certification.** Facility is in compliance with at least 70% but less than 100% of the applicable rules and will be given an opportunity to correct deficiencies.
- (D) **Temporary Certification.** Facility is in compliance with at least 70% but less than 100% of the applicable rules and will be given an opportunity to correct deficiencies.

(i) Actions on Non-Certified Providers. If at the initial site review it is found the facility is providing services:

- (1) The initial review will be conducted, including review of applicable records.
- (2) The facility must comply with the requirements of this section to proceed with the certification process.
- (3) If the applicant achieves less than 100% compliance, full certification must be achieved within four (4) months.
- (4) Upon successful completion of the certification process, Probationary Certification status will be conferred for no more than one (1) year.
- (5) Application for continued certification after the Probationary Certification period requires submission of a new application and fee(s) for each of the next two (2) years. The requirements in this section shall apply. A recommendation for Certification for one (1) year will be made to the Attorney General.

(j) **Actions on certification applications.** VASU staff shall make one of the following recommendations to the Attorney General:

- (1) Certification with Commendation;
- (2) Certification;
- (3) Conditional Certification;
- (4) Temporary Certification
- (5) Probationary Certification; or
- (6) Revocation or Denial.

(k) If the Attorney General approves a recommendation to revoke certification, an individual proceeding shall be initiated pursuant to the Administrative Procedures Act.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Amended at 35 Ok Reg 858, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-7-7. Duration of certification status

- (a) Certification status of either "Certification with Commendation" or "Certification" shall be for the period of three (3) years.
- (b) Conditional Certification granted to applicants for renewal shall be for a period not to exceed four (4) months. During that period, a follow-up site review will be conducted.
- (c) Temporary Certification granted to applicants for initial certification shall be for a period not to exceed one year. During that period, a six (6) month follow-up site review will be conducted. In the event it is determined that the program is not making satisfactory progress toward achieving full compliance, a deficiency report will be completed and a plan of correction will be required. Plans of correction may require transition planning for current clients.
- (d) Certification, Conditional, or Temporary Certification granted to an applicant shall become effective upon approval of the Attorney General.
- (e) Certification is not transferable. A change of the ownership of a facility automatically terminates any certification status, requiring application for certification by the new ownership. If the certified facility is owned by a corporation the following applies:
 - (1) If the corporation is not-for-profit, a change in membership of the Board of Directors of more than fifty percent (50%) of the Directors in three (3) or fewer calendar months, unless such change was caused by the normal expiration of terms in accordance with the By-Laws of the Board of Directors, shall require the facility to be re-certified.
 - (2) If the corporation is other than not-for-profit, a change in the ownership of more than forty per cent (40%) of the stock in the corporation from the owners at the beginning of the period of certification shall require the facility to be recertified.
 - (3) It is the responsibility of the facility to notify the Office of the Attorney General of the occurrence of either of the conditions requiring recertification as set forth in (1) and (2) of this subsection; and to request the application materials for recertification.

(f) Certification may be suspended, revoked or not renewed with the basis for such action being delineated in Section 75:1-7-9 of this Subchapter.

[**Source:** Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 25 Ok Reg 1834, eff 7-1-08 ; Amended at 35 Ok Reg 858, eff 9-14-18]

75:1-7-8. Site reviews

The Victims Advocacy and Services Unit may conduct a site review or visit or an investigation, which may or may not be announced. Reasons for such review include but are not limited to:

- (1) determination of correction of cited deficiencies;
- (2) receipt of a complaint;
- (3) change in ownership, management or location;
- (4) establishment of a new service location;
- (5) substantial change in either the service provided or new service(s) initiated;
- (6) substantial turnover in staff at the executive or professional level;
- (7) change in statutorily required licensure status; and
- (8) change in external accreditation status.

[**Source:** Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:1-7-9. Basis for a decision to issue administrative sanction of suspension, or revocation

(a) A determination that the certification status shall be reduced, suspended, or revoked or that a reprimand be issued, may be made upon the following basis:

- (1) failure to comply with certification standards;
- (2) failure to comply with appropriate statutory licensing provisions;
- (3) violation of client rights or client confidentiality;
- (4) endangerment of the safety, health, and/or the physical or mental well-being of a client served by the program;
- (5) failure to comply with accreditation, inspection, safety, or building code regulations required by local, state, or federal authorities and laws;
- (6) defrauding a client, potential client, or third party payer;
- (7) inappropriate conduct by program staff or its governing authority;
- (8) utilization of treatment techniques which endanger the safety, health, and mental health or physical well-being of program clients; or
- (9) any other just cause.

(b) Determinations to initiate proceedings for suspension or revocations are made by the Attorney General.

(c) The facility's certification status continues unless the facility fails to timely file a written request for a hearing as cited in OAC 75:1-5-4 or an order sustaining the allegations made by the Attorney General is issued.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-7-10. Contingency for non-action by the Attorney General

In the event the Attorney General is unable for any reason to consider the certification in a timely manner, any current certification status shall be automatically extended unless to do so would endanger the health, welfare and safety of clients, and there would be a danger of imminent harm.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

75:1-7-11. Reapplication following denial, suspension, revocation or denial of certification

Reapplication for consideration of certification for any program for which certification has been suspended, revoked, denied or not renewed will not be accepted or considered unless at least three (3) months has passed since issuance of a Final Order of suspension, revocation, denial or nonrenewal.

[Source: Added at 23 Ok Reg 329, eff 11-8-05 (emergency); Added at 23 Ok Reg 2189, eff 7-1-06]

CHAPTER 10. TELEMARKETER RESTRICTION ACT CONSUMER REGISTRY

[**Authority:** 15 O.S., §§ 775(B)(1) et seq.]
[**Source:** Codified 6-1-03]

SUBCHAPTER 1. ESTABLISHMENT, USE, AND ENFORCEMENT OF TELEMARKETER RESTRICTION ACT CONSUMER REGISTRY

PART 1. ESTABLISHMENT AND MAINTENANCE OF THE TELEMARKETER RESTRICTION ACT CONSUMER REGISTRY

75:10-1-1. Consumer request to be included in the registry

(a) A consumer living or residing in Oklahoma, or a care giver for a consumer living or residing in Oklahoma, may request to be included in the no-telemarketing-sales-call registry, hereafter "registry", by any of the following means:

(1) Completing a written form prepared by the Attorney General for the purpose of recording a consumer's request to be included in the registry. Consumers must submit completed forms to the Attorney General at the address listed on the form.

(2) Calling a toll-free number established by the Attorney General for the purpose of recording a consumer's request to be included in the registry.

(3) Accessing an internet site established by the Attorney General for the purpose of recording a consumer's request to be included in the registry.

(b) Consumers requesting to be included in the registry must provide the following information when the request is made: name; address; county of residence; phone numbers to be included in the registry; and, e-mail address, if available.

[**Source:** Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-2. Maintenance of registry in electronic form

The Attorney General will maintain the registry in electronic form through a computer database. The database shall consist of information submitted by consumers who have requested to be included in the registry.

[**Source:** Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-3. Deadlines to be included in the registry

Upon receipt of a properly submitted and verified request to be included in the registry by the Attorney General, consumers' names and telephone numbers included in the registry shall be circulated to

telemarketers in the quarter following the deadline for receipt of requests according to the following schedule:

- (1) January-March: December 1
- (2) April-June: March 1
- (3) July-September: June 1
- (4) October-December: September 1

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-4. No fee to consumers

Consumers will not be charged a fee to be included in the registry.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-5. Verification of a consumer's request to be included in the registry

The Attorney General will verify a consumer's request to be included in the registry by one of the following methods:

- (1) **Written requests.** Consumers must sign and date the written form prepared by the Attorney General for the purpose of recording a consumer's request to be included in the registry. A consumer's signature will serve to verify a written request.
- (2) **Telephonic requests.** After submission of a telephonic request, a consumer must confirm the request and the information provided by responding to a series of voice prompts through the telephone keypad. A consumer's affirmative responses to the voice prompts will serve to verify a telephonic request.
- (3) **Online requests.** Online requests to be included in the registry will be verified by electronic mail from the Attorney General to the consumer. The electronic mail message shall contain a request to contact the Attorney General by electronic mail, in writing, or by toll-free number if the consumer did not intend to be included in the registry.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-6. Effective duration of a consumer's request

A request to be included in the registry shall remain in effect for two years from the date the consumer is first included in the registry. The request shall be automatically renewed at the end of two years unless the consumer provides written notice to the Attorney General that the consumer no longer wants to be included in the registry.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-7. Change of telephone number

If a consumer's telephone number changes after the consumer's initial request to be included in the registry, the consumer must submit a new request to be included in the registry. The new request must be

submitted pursuant to these rules, and is subject to the deadlines herein.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-8. Removal from the registry

(a) A consumer may request to be removed from the registry by one of the following methods:

(1) **Written notice.** A consumer may request to be removed from the registry by submitting a written notice to the Attorney General. The written notice must be submitted on a form prepared by the Attorney General and returned to the address listed on the form. For verification, the form must be signed and dated by the consumer.

(2) **Telephonic notice.** A consumer may request to be removed from the registry by calling a toll-free telephone number established by the Attorney General. A consumer must confirm the request by responding to a series of voice prompts through the telephone keypad. A consumer's affirmative responses to the voice prompts will serve to verify a telephonic request to be removed from the registry.

(b) Upon receipt of a written or telephonic request to be removed from the registry, the Attorney General will remove the consumer from the registry according to the same schedule for including consumers in the registry.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

PART 2. ACCESS AND USE OF THE TELEMARKETER RESTRICTION ACT CONSUMER REGISTRY

75:10-1-9. Fees and procedure for telemarketers to access the registry

Any telemarketer, as defined in 15 O.S. Supp. 2002, § 775B.2(5), desiring to make unsolicited telemarketing sales calls to consumers in Oklahoma may obtain access to the registry, subject to the limitations, requirements and fees set forth below:

(1) A telemarketer's access to the registry shall be limited to the names, telephone numbers, and dates of registration, of consumers included in the registry.

(2) A telemarketer must execute a written confidentiality agreement prepared by the Attorney General that restricts use of the registry to the sole purpose of complying with 15 O.S. Supp. 2002, §775B.6 as amended from time-to-time; prohibits transfer to a third party of the telemarketer's access to the registry; and prohibits transfer to a third party of any information compiled by the telemarketer through access to the registry.

(3) Fees for accessing the registry shall be \$600.00 per year or \$150.00 per quarter year. Such fees must be submitted to the Attorney General before a telemarketer is given access to the

registry.

(4) A telemarketer must submit a fully completed Request for Registry Access Form to the Attorney General. Such forms will be prepared by the Attorney General and must be returned to the address printed on the form. The following information must be provided on the form:

- (A) Name, address, and phone number of telemarketer;
- (B) Name, address, and phone number of all affiliates and subsidiaries;
- (C) Name, address, and phone number of all trade, assumed, or fictitious names used by the telemarketer;
- (D) Name, address, and phone number of the person to be contacted by the Attorney General with any questions concerning the request or complaints;
- (E) Name and address of service agent;
- (F) Description of telemarketer's commercial purpose, including goods and services offered for sale by the telemarketer;
- (G) Certification that the telemarketer will fully comply with the Telemarketer Restriction Act, 15 O.S. Supp. 2002 § 775 B.1 *et seq.* and the rules promulgated thereunder.
- (H) Certification that the telemarketer has fully complied with all other applicable laws, including but not limited to, 15 O.S. Supp. 2002 § 775A.3, or if claiming an exemption under other applicable laws, a notarized affidavit explaining why the telemarketer is exempt. The Attorney General may investigate all claims for exemption pursuant to the Consumer Protection Act.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

75:10-1-10. Improper uses of the registry

No telemarketer who obtains access to the registry may use the information for purposes other than compliance with the Telemarketer Restriction Act.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

PART 3. REPORTING OF VIOLATIONS AND ENFORCEMENT

75:10-1-11. Reporting violations and assessment of fines

(a) Any consumer may report a violation of the Telemarketer Restriction Act by submitting a fully completed complaint form to the Attorney General. Such complaints may be submitted online or in writing on a form prepared by the Attorney General. Written complaint forms must be returned to the address printed on the form.

(b) Consumers will be asked for the following information on the complaint form:

- (1) Full name of complaining consumer;
 - (2) Address of complaining consumer;
 - (3) Telephone number telemarketer called;
 - (4) Name and/or telephone number of the telemarketer;
 - (5) Any information gathered by the consumer during the call concerning the telemarketer or the telemarketer's commercial purpose;
 - (6) A statement giving consent to the consumer's local exchange carrier to produce all records relating to the call to the Attorney General; and
 - (7) Any other information the Attorney General deems necessary to fully investigate the complaint.
- (c) Upon receipt of a fully completed and properly submitted complaint, the Attorney General shall conduct an appropriate inquiry to determine if a violation has occurred. If the Attorney General determines that a violation has occurred, the Attorney General may, at his discretion, proceed with an enforcement action in district court, or assess an administrative fine.
- (d) The schedule of administrative fines is as follows:
- (1) 1st and 2nd violations: not to exceed \$1,000.00 per violation;
 - (2) 3rd and 4th violations: not to exceed \$2,000.00 per violation;
 - (3) 5th and 6th violations: not to exceed \$4,000.00 per violation;
 - (4) 7th and 8th violations: not to exceed \$6,000.00 per violation;
 - (5) 9th and 10th violations: not to exceed \$8,000.00 per violation;
 - (6) All subsequent violations: not to exceed \$10,000.00 per violation.
- (e) Any telemarketer who refuses to pay an assessed fine may be assessed additional costs and reasonable attorney fees related to the collection of the fine.

[Source: Added at 19 Ok Reg 3071, eff 8-22-02 (emergency); Added at 20 Ok Reg 1081, eff 6-1-03]

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

Editor's Note: *Effective 7-1-05, the rules in this Chapter were transferred from the Department of Mental Health and Substance Abuse Services [OAC 450:15-3-70 through 450:15-3-73 and 450:19-1-1 through 450:19-15-4]. Pursuant to Senate Bill 236 (2005), "rules promulgated by the Department of Mental Health and Substance Abuse Services relating to domestic violence and sexual assault programs [were] transferred to and [became] a part of the administrative rules of the Office of the Attorney General. . . . Such rules shall continue in force and effect as rules of the Office of the Attorney General from and after July 1, 2005, and any amendment, repeal, or addition to the transferred rules shall be under the jurisdiction of the Attorney General" [Senate Bill 236 (2005), Section 6(A)]. As directed by SB 236, an Editor's Notice was published in the Oklahoma Register [see 22 Ok Reg 2667], announcing the transfer of the rules from OAC 450:15-3 and 450:19 to this Chapter [OAC 75:15], and identifying the new location in this Chapter of each transferred rule. For additional information relating to this transfer, see Senate Bill 236 (2005).*

[**Authority:** 74 O.S., § 18p-6]

[**Source:** Codified 7-1-05]

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.

[**Source:** Transferred from 450:19-1-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 27 Ok Reg 1709, eff 7-1-10]

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 programs is that:

- (1) All persons have the right to live without fear, abuse, coercion, 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, coercive, 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) Perpetrators must be held accountable for their behavior;
- (8) A coordinated community response is the best approach to eliminating domestic violence, sexual assault, sex trafficking and stalking in Oklahoma;
- (9) Safety for the victims/survivors and their dependents is the primary focus of intervention and services;
- (10) Intervention and services shall be based upon the safety and well-being of individuals and communities. Services to victims are provided in a non-judgmental, non-coercive, trauma-informed environment; and
- (11) Participation in services is voluntary and based on self-determined needs, preferences and values.

[Source: Added at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

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.

"Adult shelter for primary victim" means a certified residential living arrangement in a secure setting with support and advocacy services provided by qualified staff for adult abuse victim of domestic violence, sexual assault, or stalking. Such shelter may also provide a residential living arrangement and support and advocacy services to a minor mother as permitted by 74 O.S. § 18p-4.

"Advocacy" means the assistance provided that supports, supplements, intervenes and/or links clients and their dependents with the appropriate service components to encourage self-determination, autonomy, physical and emotional safety, and to offer information that will enable independence. This can be viewed as a combination of active listening and facilitating personal problem solving, along with researching options of action, safety planning, community outreach and education; it may include medical, dental, financial, employment, legal and housing assistance.

"Advocate" means a trained staff or volunteer who offers clients appropriate services.

"Assessment" means an appropriate course of assistance based on a formal screening.

"Behavioral Health Professional" means 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.

"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 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 survivors' skills in making desired life changes through activities such as introducing new skills, modifying previous ways of coping with their situations and linking to resources to address immediate needs and secondary issues, and/or (3) exit planning as part of individual supportive services. The service provider must be a Certified Domestic and Sexual Violence Response Professional (CDSVRP) certified by the the active certifying body or hold another case management certification that has been approved by the Victim Advocacy and Services ("VASU") Council.

"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 DVSA program"** means a status which is granted to an entity by the Oklahoma Attorney General, and indicates approval to offer 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 unmarried 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 that are 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 from a DVSA program.

"Client group education" means interactive group sessions for adult/child victims/survivors of domestic violence, sexual assault or stalking that may be topic oriented and educational and facilitated by qualified, trained staff members or volunteers. The focus is on safety, the dynamics of domestic violence, sexual assault, stalking, relationships, emotions, the impact of trauma and life skills.

"Client record" includes but is not limited to all communication, records and information about an individual client.

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

"Community education" means the presentation of domestic violence/sexual assault and stalking information to increase public knowledge of the destructive dynamics and societal costs and/or to increase awareness of available and needed resources and/or identify the role the community can play in eliminating domestic violence/sexual assault and stalking.

"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.

"Core Services" means services outlined in 75:15-2-1 that are required to be offered by all certified programs.

"Counseling" means a face-to-face therapeutic session with one-on-one interaction between a behavioral health professional and an individual to promote emotional and/or behavioral change focused on victim safety and perpetrator accountability. Those individuals providing professional therapy to adult and child victims of domestic violence, sexual assault or stalking must be prepared to offer education and information about:

- (A) Physical and emotional safety;
- (B) How perpetrators maintain control and dominance over their victims;
- (C) The need to hold perpetrators accountable for their actions;
- (D) The recognition that individuals victimized are not responsible for a perpetrator's violent behavior; and
- (E) The role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or educational status, religion and national origin.

"Counseling Evaluation and Assessment" means a tool used by a licensed behavioral health professional to evaluate and assess the adult or child victim/survivor's current situation and provide trauma-informed therapy services that are appropriate to the needs of the adult or child victim/survivor. Such evaluation and assessment must assess dangerousness indicators; provide crisis intervention when needed; and assist with safety planning and information on legal options available.

"Counseling service planning" or "Licensed Behavioral Health Professional or Under Licensure Supervision" means the

process of developing a written plan based on formal or informal assessments that identify the abuse issues necessitating treatment developed by a licensed behavioral health professional or an individual under licensure supervision. Counseling service planning includes establishing goals and objectives; planning appropriate interventions; developing safety planning; and a review of the treatment plan with the individual 14 years of age or older and the modification of the plan as required. If the individual is under 18 years of age, the parent or guardian must also be involved.

"Counseling service plan review" means the evaluation or updating of the treatment plan by a licensed behavioral health professional or under licensure supervision based on victim's or survivor's documented progress. A counseling service plan review must be in writing and signed by the victim or survivor. Such plan also includes a review of the treatment plan with the individual and the modification of the plan as required, if the individual is 14 years of age or older. If the individual is under 18 years of age, the parent or guardian must also be involved.

"Court advocacy" means assistance provided to victims and their dependents in legal matters relevant to their situation. Information, support, 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. Court advocacy services must be provided by qualified, trained staff members or volunteers.

"Court advocate" means a qualified, trained staff or volunteer whose duties are to offer assistance to victims and any dependents in legal matters relevant to their situation. A Court Advocate provides court advocacy through 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. Court advocates shall not act as licensed attorneys and are not permitted to give legal advice, unless such person is a licensed attorney in the state of Oklahoma.

"Crisis intervention" means short-term, immediate assistance and advocacy given by phone or in person to victims of domestic violence, sexual assault or stalking. Crisis intervention services include but are not limited to assessing dangerousness, safety planning, information about available legal remedies, establishing rapport and communication, identifying major problems, exploring feelings and providing support, exploring possible alternatives, and/or formulating an action plan and follow-up measures.

"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.

"Cultural diversity" means the spectrum of differences that exist among groups of people with definable and unique cultural backgrounds.

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

"DVSA" 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 a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over a current or former partner or family member. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.

"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, stalking 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 to stimulate social action or community support of the program and its clients.

"Emergency services" or **"crisis services"** mean 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 DVSA to a secure identified location at which emergency services or crisis services can be offered.

"Executive director" means the person hired by the governing authority to direct all the activities of the organization. May also be referred to as "Chief Executive Officer."

"External consultation" means a formal and structured process of interaction between staff members and unrelated individuals, groups, or agencies for the purpose of problem solving and/or enhancing services for the safety of victims/survivors within the program's service area.

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

"Family" means the children, spouses, 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 DVSA program, or shelter, in and of all geographical locations and administrative divisions.

"Group counseling" means a face-to face therapeutic session conducted by a licensed behavioral health professional or individual

under licensure supervision with a group of adult or child victim/survivors to promote emotional or behavioral change. Those individuals providing professional therapy to victims/survivors of domestic violence must be prepared to provide education and information about:

- (A) Physical and emotional safety;
- (B) How perpetrators maintain control and dominance over their victims;
- (C) The need to hold perpetrators accountable for their actions;
- (D) The recognition that individuals victimized are not responsible for a perpetrator's violent behavior; and
- (E) The role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or educational status, religion and national origin.

"Guardian" means an individual who has been given the legal authority to manage the affairs of another individual.

"Human trafficking" means modern-day slavery that includes, but is not limited to, extreme exploitation and the denial of freedom or liberty of an individual for purposes of deriving benefit from that individual's commercial sex act or labor.

"Human sex trafficking" means a specific type of human trafficking that includes, but is not limited to:

- (A) Recruiting, enticing, harboring, maintaining, transporting, providing or obtaining, by any means, another person through deception, force, fraud, threat or coercion for purposes of engaging the person in a commercial sex act;
- (B) Recruiting, enticing, harboring, maintaining, transporting, providing, purchasing or obtaining, by any means, a minor for purposes of engaging the minor in a commercial sex act; or
- (C) Benefitting, financially or by receiving anything of value, from participating in a venture that has engaged in an act of trafficking for commercial sex.

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

"Individual counseling" means a therapeutic session with one-on-one interaction between a behavioral health professional or individual under licensure supervision and a person to promote emotional and/or behavioral change focused on victim safety and perpetrator accountability. Those individuals providing professional therapy to adult and child victims of domestic violence, sexual assault, or stalking must be prepared to offer education and information about:

- (A) Physical and emotional safety;
- (B) How perpetrators maintain control and dominance over their victims;

- (C) The need to hold perpetrators accountable for their actions
- (D) The recognition that individuals victimized are not responsible for a perpetrator's violent behavior; and
- (E) The role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or education status, religion and national origin.

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

"Intake" means an interaction intended to discover what has happened, determine what the crisis is, assess dangerousness indicators, do safety planning, and/or establish the immediate needs of domestic violence, sexual assault, and stalking victims and any dependents to determine appropriate services and referrals. This includes interaction with an individual determined to be appropriate for ongoing service in order to obtain basic demographic information, gather vital information on adults and/or children, and/or orient the victims to the program, program rules, and if applicable, the facilities. Cultural needs should also be identified at this time.

"Internal consultation" means a formal and structured process of interaction among staff from the same agency for the purpose of evaluating the individual's progress, when the individual is not present.

"Language Interpretation" means activities that involve a client who is deaf or hearing impaired or has limited English proficiency requiring an interpreter for a staff member or volunteers to offer services.

"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 that can only be provided or supervised by a licensed physician.

"Medication" means any drug that is legally in the possession of clients, their children, or persons seeking admittance to the shelter or their children; this definition includes prescription medications and medications available for legal purchase without a prescription.

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

"Neglect" means failing to offer adequate personal care or maintenance, or access to medical care that 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 that 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 offered by the program.

"Outreach" means the dissemination of materials and information at community events and public places, with the purpose of establishing trust and rapport, explaining services available.

"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 and hard of hearing, blind, physically disabled, developmentally disabled, persons with disabling illness, and 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, volunteers, activities, and planning process to determine whether program goals are met, staff, volunteers and activities are effective, and what effect, if any, a program or service has on the problem it was created to address or on the population 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 75:15-13-20.1.

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

"Release" or **"Waiver"** means consent that is informed, written and reasonably time-limited. The terms may be used interchangeably to mean the same thing. "Release" implies that confidential information is released (despite confidentiality or privilege protection), and "Waiver" implies waiving a right (to maintain privilege). If release of information is compelled by statutory or court mandate, the program shall make reasonable attempts to provide notice to victims affected by the disclosure of information and take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

"Referral" means information disseminated and/or coordinated access to agency and community services to meet victims'/survivors' and their dependents' identified needs.

"Safety Planning" means the process of working with adult and child victims to develop tools in advance of potential abuse or violence for the immediate and long term safety of victims. Plans should be based on dangerousness and lethality 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 service needs. 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 who has a relationship with the primary victim.

"Self Determination" means the right to make one's own choices.

"Service Agreement" means a written agreement between two or more service agencies or service agencies and individual service providers that defines 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 documentation of the time, date, location, and description of services offered or provided, and signature, including electronic signature, of staff or volunteer offering or 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" means a range of behaviors, including but not limited to rape, attempted rape, sexual battery, sex trafficking, sexual abuse of children, sodomy, and sexual harassment.

"Sexual Assault Services" means personal advocacy and support services provided to primary and secondary victims of rape and sexual assault.

"Shelter for dependents" means a certified residential living arrangement in a secure setting with support and advocacy services provided by qualified staff for any dependents of the primary abuse victim of domestic violence, sexual assault and stalking.

"Shelter Services" means a certified 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.

"Short term emergency shelter" means temporary residential sites which are provided to immediately remove domestic violence, stalking or sexual assault victims and their dependents from danger. Sites might include hotel/motel or other sites as appropriate.

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

"Staff and volunteer education" means a structured, formal process by which information is delivered to or received by staff or volunteers for orientation purposes, enhancement of service procedures, ongoing in-service, or accreditation for professional/contractual

requirements.

"Stalking" means a course of conduct directed at a specific person that would cause a reasonable person to feel fear.

"Substance Abuse Services" means the assessment and treatment of diagnosable substance abuse and dependence disorders, as defined by current DSM criteria, by qualified alcohol and drug treatment professionals.

"Support" or **"Supportive Services"** means the provision of direct services to primary and secondary victims and their dependents for the purposes of preventing further violence, helping such victims to gain access to civil and criminal courts and other community services, facilitating the efforts of such victims to make decisions concerning their lives in the interest of safety, and assisting such victims in healing from the effects of violence.

"Transitional Living Services" means temporary, independent living programs with support services provided by the staff or volunteers of the sponsoring domestic violence, sexual assault and stalking program. These services are extensions of domestic violence shelter services to victims of domestic violence, sexual assault or stalking and their dependents. These services permit victims to develop their financial capacity and other means to live independently.

"Transitional living services for dependents" means temporary, independent living programs with support services provided by the staff or volunteers for dependents of a primary abuse victim of domestic violence, sexual assault and stalking.

"Trauma-informed services" means a service approach that recognizes the impact of trauma and acknowledges its role in the lives of primary and secondary victims and their dependents.

"Travel" means transporting individuals to access needed services.

"Universal precautions for transmission of infectious diseases" means those guidelines promulgated by the U.S. Occupational Health and Safety Administration that 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.

"Voluntary Services" means a program shall not mandate participation in supportive services as a condition of shelter residency or emergency services (Family Violence Prevention and Services Act, 42 U.S.C. 10408)

"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, including interns and practicum students.

[Source: Transferred from 450:19-1-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18 ; Amended at 36 Ok Reg 1379, eff 9-13-19 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

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; and
- (3) **"May"** is the term used to reflect an acceptable method that is recognized but not necessarily preferred.

[Source: Transferred from 450:19-1-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

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

[Source: Transferred from 450:19-1-4 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06]

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

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

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

[Source: Transferred from 450:19-1-6 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

SUBCHAPTER 2. DOMESTIC VIOLENCE AND SEXUAL ASSAULT PROGRAMS

75:15-2-1. Service programs core services

- (a) All certified programs shall provide safe, accessible, and trauma-informed services for victims of domestic violence, sexual assault and stalking and their dependents or family members.
- (b) The program shall develop a philosophy of service provision based upon voluntary services and individual self-determination. The written statement of the philosophy of services shall be approved by the governing authority and made available to the community, staff, volunteers, and clients.
- (c) The program shall have policies and procedures to maintain facilities, staffing, and operational methods, including a policy for recruitment of board members, staff and volunteers who are representative of diversity in the local community and diversity of clients.
- (d) All certified programs shall provide sexual assault services as outlined in 75:15-2-6.

- (e) All certified programs shall offer crisis intervention services as outlined in 75:15-2-5.
- (f) All certified programs shall offer danger assessment, safety planning, counseling or support, support groups, and advocacy in a trauma-informed environment.
- (g) All certified programs shall offer services that are free from all forms of unlawful discrimination based on race, sex, color, age, national origin, genetic information, religion, and/or disability (i.e., physical, mental illness, and substance abuse), including a policy stating that services will not be denied or diminished on the basis of immigration status.
- (h) 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 to identify the role community can play in eliminating domestic violence, sexual assault, and stalking.
- (i) Compliance with 75:15-2-1 shall be determined by a review of the program's policies and procedures, service agreements, on-site observations, client and staff or volunteer interviews and/or other supporting documentation.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19 ; Amended at 38 Ok Reg 1691, eff 9-11-21]

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 offer services twenty-four (24) hours per day, seven (7) days per week, and offer the following:

- (1) Shelter programs shall provide room, food, bathing and laundry facilities, necessary clothing, and toiletries for victims and their children free of charge. Programs shall not ask clients to use their nutrition assistance benefits to supplement food for the facility;
- (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) The shelter shall offer services to clients with dependent boys over the age of twelve;
- (5) Shelter programs shall offer screening, referral and linkage to clients and callers to appropriate community resources, to include assistance in making initial contact;
- (6) The shelter program shall maintain cooperation/liason with the local school system;
- (7) Each shelter program must ensure to the best of its ability the physical and emotional safety, security and confidentiality of clients and the location of the shelter; and

- (8) The shelter shall maintain a written policy for involuntary exit criteria.
- (b) Compliance with 75:15-2-2 shall be determined by a review of policies and procedures, service agreements, on-site observations, and/or other supporting documentation.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 victims 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 offer 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 or a volunteer as the advocate or liaison for the clients residing in the transitional living program(s). This person, or a crisis line staff person or volunteer, 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; and
 - (7) The program shall offer at least one 30 minute face-to-face service contact per week with each transitional living resident and children.
- (b) Compliance with 75:15-2-3 shall be determined by a review of program policies and procedures, client records, on-site observations, written agreements and/or other supporting documentation.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-2-4. Safe Home program [REVOKED]

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-2-5. Crisis intervention services

(a) All certified DVSA programs shall offer crisis intervention services which include:

- (1) Twenty-four (24) hour crisis telephone services staffed by trained staff or volunteers, and 24-hour immediate, direct access to crisis advocates. Technology or services that do not offer 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 program shall provide twenty-four (24) hour emergency transportation or access to shelter, to and from SANE exams or other emergency services. Additionally, transportation shall be offered for other services necessary for victim safety. This shall not require service providers to be placed in a situation that could result in injury;
- (5) Cooperation with law enforcement to offer assistance to the victim and accompanying dependent(s). Programs should ensure victims are educated about participating in the legal prosecution of their offenders and that an appropriate release or waiver may be necessary;
- (6) Provision of advocacy and referral to assist victims in obtaining needed services or resources;
- (7) Language interpretation; and
- (8) Follow-up services shall be offered to all victims if victim safety is not compromised.

(b) Group and/or individual counseling or support services shall be made available before or after normal business hours (8:00 a.m. to 5:00 p.m.), if needed by clients. These services shall minimally offer the following:

- (1) A facility with offices and individual and group counseling space to offer services;
- (2) Advocacy services, both in person and by telecommunication, 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; and
- (3) Service approaches shall focus on the empowerment of victims to access needed resources and to make healthy and safe decisions for themselves and dependents.

(c) Programs shall maintain at a minimum the following client resources:

- (1) Service agreements with community service providers for client services, which shall be renewed every three (3) years. If unable to establish a service agreement, attempts shall be documented;
- (2) A resource document of local, area, or state resources to facilitate referrals for clients; and
- (3) 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 related trauma and need mental health or substance

abuse services.

(d) Compliance with 75:15-2-5 shall be determined by a review of program policies and procedures, client records, on-site observations, written agreements, and/or other program documentation.

[Source: Added at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-2-6. Sexual assault services

(a) All certified programs shall 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 DVSA providers in their service area. The program shall offer at a minimum the following services:

- (1) Counseling or advocacy and support services shall be offered at any safe and appropriate site, as needed by the client;
- (2) A twenty-four (24) hour crisis line, crisis intervention, in-person advocacy, 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 when chosen by the victim;
- (3) Clothing, if needed, for sexual assault victims; and
- (4) 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 agency services or other available resources needed by the client.

(b) When appropriate staff or volunteers are available, the program shall assist the Council on Law Enforcement Education and Training (CLEET) by providing appropriate staff or volunteers to assist in sexual assault and sexual violence training to law enforcement.

(c) Agencies without behavioral health professionals on staff, shall maintain an updated list of identified behavioral health professionals in their community who treat clients with sexual assault related trauma.

(d) Compliance with 75:15-2-6 shall be determined by a review of program policies and procedures, client records, on-site observations, written agreements, and/or other program documentation.

[Source: Added at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-2-7. Children's services

(a) Client records for both residential and non-residential children shall contain, at a minimum, the following information:

- (1) Intake and screening information:
 - (A) Client's name;
 - (B) Date of initial contact/intake;
 - (C) Age;
 - (D) Pertinent medical information;

- (E) Mother's name;
 - (F) Father's name; and
 - (G) Name of adult client's abuser.
- (2) Custody
 - (A) Has a court entered a custody order? If yes, what does the order provide?;
 - (B) With whom does the child physically reside?;
 - (C) Does the child have contact with the adult client's abuser?; and
 - (D) Is visitation court ordered with the abuser?
- (3) 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; and
 - (D) History of involvement in the child welfare system; including the presence of current child welfare involvement.
- (4) Service notes, which shall minimally include: The date, location, start time, duration and description of services provided delineated by time spent and service code, if applicable, or documentation of referral to other services or case management.
- (b) Within five (5) business days of entry into residential services (excluding advocacy or children's activities or crisis intervention), all certified programs shall offer to assess the risk and needs of the children accompanying primary victims and offer 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, when accepted, shall minimally include:
 - (1) Brief trauma screening to assess the impact of trauma;
 - (2) Developmental history to include speech and language, hearing and visual;
 - (3) Medical or physical health history;
 - (4) Social history to include interactions with peers;
 - (5) History of use of tobacco, alcohol or other drugs;
 - (6) Parent/guardian custodial status; and
 - (7) Community referral needs.
- (c) Services provided to each child shall be culturally sensitive while addressing identified risks 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 educational needs;
 - (6) Parenting support for clients, if applicable; and
 - (7) Children's groups using age appropriate topics and based on established best practices.
- (d) Pursuant to 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.

(e) Compliance with 75:15-2-7 shall be determined by a review of program policies and procedures, client records, on-site observations, written agreements, and/or other program documentation.

[Source: Added at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18]

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

PART 1. REQUIRED DV/SA SHELTER PROGRAM COMPONENTS [REVOKED]

75:15-3-1. Shelter services program [REVOKED]

[Source: Transferred from 450:19-3-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

75:15-3-2. Crisis intervention services program [REVOKED]

[Source: Transferred from 450:19-3-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

PART 2. OTHER SERVICE COMPONENTS [REVOKED]

75:15-3-7. Transitional living services program [REVOKED]

[Source: Transferred from 450:19-3-7 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

75:15-3-8. Safe home services program [REVOKED]

[Source: Transferred from 450:19-3-8 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

75:15-3-9. Batterer's intervention services program [REVOKED]

[Source: Transferred from 450:19-3-9 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

75:15-3-10. Sexual assault services program [REVOKED]

[Source: Transferred from 450:19-3-10 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

SUBCHAPTER 4. BATTERERS INTERVENTION PROGRAMS [REVOKED]

75:15-4-1. Purpose [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-2. Batterers intervention program [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-3. Victim safety and confidentiality [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-4. Client records [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08]

75:15-4-5. Record content [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-6. Client confidentiality [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

75:15-4-7. Physical safety and integrity of client records [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-8. Client record, handling, retention, and disposal [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-9. Physical plant, primary role [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

75:15-4-10. Fire and safety codes and inspections [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-11. Fire fighting and first aid equipment [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-12. Disaster procedures [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-13. Persons with special needs [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-14. Program environment [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-15. Admission criteria [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-16. Program management, policy and procedures [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-17. Program mission and goals [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 25 Ok Reg 1838, eff 7-1-08]

75:15-4-18. Annual program evaluation [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07]

75:15-4-19. Critical incidents [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-20. Client rights [REVOKED]

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

75:15-4-21. Client grievance policy and procedures [REVOKED]

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

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.

[Source: Transferred from 450:19-5-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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. No identifying information such as initials, age, year of birth, or gender shall be part of the client ID. That same discreet identifier shall be the client ID that is entered into the OAG database without further encryption.
- (b) A certified program shall have written policies 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 policies 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.

[Source: Transferred from 450:19-5-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

- (a) Client records for both residential and non-residential clients 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;
 - (D) Emergency contact information;
 - (E) History/nature of abuse including an evidence-based, dangerousness assessment and screening for stalking and trauma including a description of the event that

- precipitated the request for services and safety planning;
 - (F) Screening for strangulation and head trauma, if applicable, information shall be given to client; and
 - (G) Perpetrator information if known.
- (2) Service notes, which shall minimally include:
- (A) The date, location, start time, duration and description of service provided delineated by time spent and service code; and
 - (B) The signature of staff or volunteer providing the services.
- (3) Service plan shall focus on victim safety and well-being which shall minimally include goals and objectives of the client, which shall be agreed upon between the client and staff or volunteer.
- (4) Exit information, which shall minimally include:
- (A) Documentation that the client participated in planning for the client's exit from the program;
 - (B) The reasons for the client's exit or departure; and
 - (C) Client and staff or volunteer dated signatures or an explanation if staff or the volunteer were unable to obtain the client's signature.
- (b) Each client record entry shall be legible, dated and signed by the staff member or volunteer making the entry.
- (c) Compliance with 75:15-5-3 shall be determined by a review of program policies and procedures, review of the client records for content and/or other supporting program documentation.

[Source: Transferred from 450:19-5-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18]

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 or volunteer 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. An evidence-based, dangerousness assessment and safety planning shall be offered to be done at this time;
 - (B) Shelter clients shall be offered the full intake interview and screening within forty-eight (48) hours of entry into the shelter. If a client declines to participate with intake process, staff or volunteer shall document offer of services;
 - (C) Service plans shall be offered and completed within five (5) business days of the shelter client's entry to the shelter. If a client declines to participate with the formation of a service plan, staff or volunteer shall

document offer of services;

(D) The service plan shall be offered to be reviewed and updated at least every two (2) weeks. If the client declines to review the service plan, staff or volunteer shall document offer of services;

(E) The client's service plan shall be offered to include components which address the needs of each child accompanying the client. If the client declines to add components for their children, staff or volunteer shall document offer of services;

(F) The service plan shall be offered to include safety issues for client and children. If the client declines to include safety issues, staff or volunteer shall document offer of services, and

(G) A daily note.

(2) Crisis Intervention Services:

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

- (i) Staff/Volunteer Name and signature;
- (ii) Date, time, length, and location of intervention;
- (iii) Safety planning based on risk;
- (iv) Client's name, age, race, county of residence, and contact number if given;
- (v) Protective order information if applicable;
- (vi) Personnel involved such as police, hospital, etc.;
- (vii) Summary of contact including injuries observed and services requested;
- (viii) Follow-up services shall be offered to all victims if victim safety is not compromised; and
- (ix) 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) Safety planning based on risk;
- (iv) 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;
- (v) Summary of the call including services needed and offered;
- (vi) Outcome; and

(C) Contact information is kept by the 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. If a client declines to participate staff or volunteer shall document offer of services;

(B) A service plan shall be completed by the fifth (5th) advocacy or counseling session. If a client declines to participate staff or volunteer shall document offer of services; and

(C) A service plan review and update shall be completed at a minimum of once every six (6) months. If a client declines to participate staff or volunteer shall document offer of services;

(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. If a client declines to participate staff or volunteer shall document offer of services; and

(B) Service plans shall be reviewed and updated at a minimum of once every six (6) months. If a client declines to participate staff or volunteer shall document offer of services.

(5) Transitional Living Services:

(A) A service plan including safety issues for the client and dependents shall be developed within five (5) business days of the client moving in; and

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

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

[Source: Transferred from 450:19-5-3.1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18 ; Amended at 38 Ok Reg 1691, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-5-4. Client confidentiality

(a) The DVSA program shall comply with both state and federal laws governing confidentiality and any exceptions to those laws.

(1) State Law: Case or client records, files or notes, of a DVSA program shall be confidential and shall only be released under certain prescribed conditions (74 O.S. § 18p-3):

(A) The case records, case files, case notes, client records, or similar records of a domestic violence or sexual assault

program certified by the Attorney General or of any employee or trained volunteer of a program regarding an individual who is residing or has resided in such program or who has otherwise utilized or is utilizing the services of any domestic violence or sexual assault program or counselor shall be confidential and shall not be disclosed;

(B) For purposes of this subsection, the term "client records" shall include, but not be limited to, all communications, records, and information regarding clients of domestic violence and sexual assault programs; and

(C) The case records, case files, or case notes of programs specified in paragraph 1 of this subsection shall be confidential and shall not be disclosed except with the written consent of the individual, or in the case of the individual's death or disability, of the individual's personal representative or other person authorized to sue on the individual's behalf or by court order for good cause shown by the judge in camera.

(2) Federal Law:

(A) The Violence Against Women Act universal grant conditions regarding confidentiality, Section 3 of VAWA, 34 USC §12291(b)(2) provides, in part: In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees and subgrantees shall protect the confidentiality and privacy of persons receiving services. Grantees and subgrantees shall not: disclose, reveal, or release any personally identifying information or individual information collected in connection with services requested, utilized, or denied through grantee and subgrantee programs, regardless of whether the information has been encoded, encrypted, hashed or otherwise protected; or disclose, reveal, or release individual client information without the informed, written, reasonably time-limited consent of the person (or in the case of an unemancipated minor, the minor and the parent or guardian or in the case of legal incapacity, a court-appointed guardian) about whom information is sought, whether for this program or any other Federal, State, tribal, or territorial grant program, except that consent for release may not be given by the abuser of the minor, incapacitated person, or the abuser of the other parent of the minor. If a minor or a person with a legally appointed guardian is permitted by law to receive services without the parent's or guardian's consent, the minor or person with a guardian may release information without additional consent. If release of information is compelled by statutory or court mandate, grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the disclosure of information and take

steps necessary to protect the privacy and safety of the persons affected by the release of the information. In no circumstances may an adult, youth, or child victim of domestic violence, dating violence, sexual assault, or stalking be required to provide a consent to release identifying information as a condition of eligibility for the services provided.

(B) The Family Violence Prevention and Services Act universal grant conditions on confidentiality, 42 USC 10401 et seq. provides, in part: Personally identifying information. The term personally identifying information has the meaning given the term in the Violence Against Women Act. In order to ensure the safety of adult, youth, and child victims of family violence, domestic violence, or dating violence, and their families, grantees and subgrantees under this title shall protect the confidentiality and privacy of such victims and their families. Subgrantees shall not disclose any personally identifying information collected in connection with services requested (including services utilized or denied), through grantee and subgrantee programs; or reveal personally identifying information without informed, written, reasonably time-limited consent by the person about whom information is sought, whether for this program or any other Federal or State grant program, which consent shall be given by the person, except in the case of an unemancipated minor, the minor and the minor's parent or guardian; or in the case of an individual with a guardian, the individual's guardian; and may not be given by the abuser or suspected abuser of the minor or individual with a guardian, or the abuser or suspected abuser of the other parent of the minor. If release of information is compelled by statutory or court mandate grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the release of the information; and grantees and subgrantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(C) Victims of Crime Act regulations on confidentiality applying to grantees, 28 CFR §94.115 provides in part: Sub-recipients of VOCA funds shall, to the extent permitted by law, reasonably protect the confidentiality and privacy of persons receiving services under this program and shall not disclose, reveal, or release any personally identifying information or individual information collected in connection with VOCA-funded services requested, utilized, or denied, regardless of whether such information has been encoded, encrypted, hashed, or otherwise protected; or individual client information, without the informed, written, reasonably time limited consent of the person about whom

information is sought, except that consent for release may not be given by the abuser of a minor, incapacitated person, or the abuser of the other parent of the minor. If a minor or a person with a legally appointed guardian is permitted by law to receive services without a parent's (or the guardian's) consent, the minor or person with a guardian may consent to release of information without additional consent from the parent or guardian. If release of information is compelled by statutory or court mandate, SAAs or sub-recipients of VOCA funds shall make reasonable attempts to provide notice to victims affected by the disclosure of the information, and take reasonable steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) Housing Assistance Emergency Solutions Grants, at 42 U.S.C. § 11375 (c)(5), require recipients to develop and implement procedures to ensure confidentiality of records pertaining to any individual provided family violence prevention or treatment services under this part and that the address or location of the family violence shelter project assisted under this part will not be made public without written authorization of the person or persons responsible for the operation of such shelter; and

(E) Stewart B. McKinney Homeless Assistance Act, at 42 U.S.C. § 1130163, mandates that any victim service provider that is a recipient or subgrantee shall not disclose for purposes of the Homeless Management Information System (HMIS) any personally identifying information about any client. Subgrantees may be required to disclose for purposes of HMIS non-personally identifying information that has been de-identified, encrypted, or otherwise encoded. The Violence Against Women Act also contains a provision that specifies a domestic violence program provider shall not disclose any personally identifying information about any client to the Homeless Management Information System (HMIS).

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

[Source: Transferred from 450:19-5-4 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19 ; Amended at 38 Ok Reg 1691, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-5-4.1. Waiver of Confidential Information

(a) For a waiver of confidentiality to be valid, it shall:

- (1) Be voluntary;
- (2) Relate only to the participant or the participant's dependents;
- (3) Clearly describe the scope and any limitations of the information to be released;

- (4) Include an expiration date;
 - (5) Inform the participant that consent can be withdrawn at any time, orally or in writing;
 - (6) Programs shall only share the specific information the client allows in the release. The client gets to choose when, how and what personal information will be shared, or not shared, and with whom;
 - (7) Even when a court mandate requires the program to disclose or release information about the client, the program shall only share the minimum information necessary to meet the statutory or court mandate; and
 - (8) The program/agency shall notify the victim of any disclosure and to continue taking steps to protect the victim's safety and privacy.
- (b) A valid written release form for disclosure of client information shall have, at a minimum, the following elements:
- (1) the specific name or general designation of the program or person permitted to make the disclosure;
 - (2) the name and title of the individual, agency or organization to which disclosure is to be made;
 - (3) the name of the client whose records are to be released;
 - (4) the purpose of the disclosure;
 - (5) a description of the information to be disclosed;
 - (6) the dated signature of the client or authorized representative or both when required;
 - (7) a statement of the right of the client to revoke the release in writing and a description of how the client may do so; and
 - (8) an expiration date, specified event or condition which, if not revoked before, shall ensure the release will last no longer than reasonably necessary to serve the purpose for which it is given.
- The reasonableness of this time period will depend on the specific situation.
- (c) Legacy clause: Some programs have chosen to talk with clients about the lethality of domestic violence and ask if they would like the program to share information with the Oklahoma Fatality Review Board in the event that the client dies (due or not due to DV). Programs shall have the "legacy clause" exception on a different form.
- (d) The program shall have written policies 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.
- (e) Compliance with 75:15-5-4.1 shall be determined by a review of the program's policies 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 policies and procedures; on-site review of locking mechanisms and procedures to assure security; and onsite observation of the handling of client records.

[Source: Transferred from 450:19-5-5 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

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

(b) Client records shall not be maintained and/or stored at a location other than the certified locations without the prior written authorization of the Office of the Attorney General.

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

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

[Source: Transferred from 450:19-5-6 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19]

75:15-5-7. Shelter Policy on Medications

(a) The shelter shall seek to afford shelter residents with the greatest possible privacy and autonomy in regard to their medication, while also providing a safe shelter environment, as follows:

(1) Staff and volunteers shall not dispense medication or require residents to request their medication;

(2) The shelter will provide every resident with an individual locking box, locker, or locking cabinet ("locked space") for storage of medications and valuables or lock the clients' medication in a safe but accessible location;

(3) The shelter will not limit or monitor the client's access to the client's medication;

(4) If a client indicates that he or she needs access to refrigerated storage space, the shelter will provide refrigerated storage space in the manner that provides the greatest possible privacy and autonomy; and

(5) The shelter shall have a policy for the disposal of unused or abandoned medication or other substances.

(b) Safety Agreement: During a resident's stay at shelter, the client shall be asked to make sure that any medications the client has are safely secured. The shelter will ask every resident to sign an agreement that the client will store any medications in the client's individual locking box, locker, or locking cabinet provided, or if it is one requiring refrigeration, as otherwise provided. The agreement will provide that residents who have medications that must be taken in the event of a medical emergency may carry them on their person (e.g., in a fanny pack).

(c) Compliance with 75:15-5-7 shall be determined by a review of the program's policies and procedures, and on-site observation.

[Source: Added at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-5-8. [RESERVED]

75:15-5-9. [RESERVED]

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

[Source: Transferred from 450:19-5-10 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

SUBCHAPTER 7. PHYSICAL ENVIRONMENTS

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

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

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

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

[Source: Transferred from 450:19-7-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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.

[Source: Transferred from 450:19-7-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 or volunteers.

[Source: Transferred from 450:19-7-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11]

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, staff or volunteer. 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 or volunteer interviews, and documentation of drills.

[Source: Transferred from 450:19-7-4 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11]

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

(a) Pursuant to the Americans with Disabilities Act of 1990, the program 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 offer equal opportunities for services. Referrals must be offered when necessary, and the program shall have written procedures for referrals of disabled persons who cannot 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 offered 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 policies and procedures.

[Source: Transferred from 450:19-7-5 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 65°F and 85°F;
 - (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 backup lighting;
 - (11) Telephones shall be provided for the convenience of the staff or volunteers, and the necessary accommodation of the clients;
 - (12) There shall be written policies and procedures addressing the use of any outdoor recreational space, including required supervision and the safety of children;
 - (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; and
 - (15) The Poison Control Center's toll-free telephone number shall be posted and visible to staff, volunteers and clients at all times.
- (b) Compliance with 75:15-7-6 shall be determined by a review of program policies and procedures, staff, volunteer and client interviews, and on-site observation.

[Source: Transferred from 450:19-7-6 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

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 policies 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 policies and procedures shall address secure storage of client valuables;
- (12) Written policies 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; and
- (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 that clearly delineates each

individual's responsibility for various tasks.

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

[Source: Transferred from 450:19-7-7 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-7-8. Program environment, Safe Home services program [REVOKED]

[Source: Added at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

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 meet state and local fire code inspection;
- (4) outdoor openings such as windows shall be covered for privacy; and
- (5) 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.

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

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

SUBCHAPTER 8. TECHNOLOGY

75:15-8-1. Technology and system plan

(a) The agency shall have a written plan regarding the use of technology to support and advance effective and efficient service and business practices. The plan shall include, but not be limited to:

- (1) Hardware and software.
- (2) Security.
- (3) Confidentiality.
- (4) Backup policies.
- (5) Assistive technology.
- (6) Disaster recovery preparedness.
- (7) Virus protection.

(b) Compliance with 75:15-8-1 shall be determined by a review of the facility policies, performance improvement plans and technology system plan.

[Source: Added at 38 Ok Reg 1691, eff 9-11-21]

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 policies and procedures.

[Source: Transferred from 450:19-9-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-9-2. Program management, policies and procedures

- (a) The agency shall maintain written policies and procedures that describe each program service component, the rules clients are expected to follow for each component and staff or volunteer 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; and
 - (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 policies and procedures; rules; client interviews and record documentation.

[Source: Transferred from 450:19-9-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-9-3. [RESERVED]

75:15-9-4. [RESERVED]

75:15-9-5. [RESERVED]

75:15-9-6. [RESERVED]

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 staff 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.

[Source: Transferred from 450:19-9-7 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11]

75:15-9-8. Annual program evaluation

- (a) On or before December 31 each year, the agency shall submit an annual evaluation of the program's services, facilities and policies and procedures, covering the period between July 1 - June 30. This evaluation shall be carried out according to a written plan established in policies 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, volunteers 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 staff and volunteers.
- (c) Compliance with 75:15-9-8 shall be determined by a review of the program evaluation, policies and procedures, staff meeting minutes, and/or any other supporting documentation.

[Source: Transferred from 450:19-9-8 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19]

75:15-9-9. Critical incidents

- (a) The program shall have policies 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), volunteers, 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 or volunteer 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; and
 - (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) 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, including electronic 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; and
 - (2) 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 including electronic 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 policies and procedures, critical incident reports at the program and those submitted to the Office of the Attorney General Victims Services Unit.

[Source: Transferred from 450:19-9-9 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

[Source: Transferred from 450:19-9-10 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

SUBCHAPTER 11. CLIENT RIGHTS [REVOKED]

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

[Source: Transferred from 450:19-11-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

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

[Source: Transferred from 450:19-11-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

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

[Source: Transferred from 450:19-11-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

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. Prior to employment all certified programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of employees to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all programs are required to conduct a name search of employees against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act.

(b) The agency's policies 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 afore 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 and volunteers, review of staff meeting minutes and/or other supporting documentation.

[Source: Transferred from 450:19-13-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19]

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

[Source: Transferred from 450:19-13-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-

06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

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 or volunteer interviews.

[Source: Transferred from 450:19-13-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-13-4. Selection of personnel

(a) The methods for selecting personnel shall be described in policies 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) Review of the policies and procedures;
- (2) Review of job descriptions for personnel; and
- (3) Review of any other supporting documentation.

[Source: Transferred from 450:19-13-4 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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) Review of the program's policies and procedures; and
- (2) Review of the program's job descriptions.

[Source: Transferred from 450:19-13-5 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-13-6. [RESERVED]

75:15-13-7. [RESERVED]

75:15-13-8. Personnel records

(a) The agency shall maintain record(s) for each staff member or volunteer 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 or volunteer performance evaluation(s); and
 - (8) Emergency notification information.
- (b) Compliance with 75:15-13-8 shall be determined by a review of personnel records.

[Source: Transferred from 450:19-13-8 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 policies and procedures, or any other supporting documentation provided including, but not limited to, personnel manuals, organizational charts, job descriptions, and personnel files.

[Source: Transferred from 450:19-13-9 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 or volunteer's job description;
 - (4) Each evaluation shall be individually discussed with the staff or volunteer;
 - (5) Personnel shall have a documented opportunity to respond, in writing, to each of their individual performance evaluations; and
 - (6) Both staff or volunteer and supervisor shall sign and date the performance evaluation. However, the evaluation document shall state the staff's or volunteer'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.

[Source: Transferred from 450:19-13-10 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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. Prior to direct services volunteering, all programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of volunteers to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all programs are required to conduct a name search of direct services volunteers against the registries maintained pursuant to the Oklahoma Sex Offender Registration Act and the Mary Rippy Violent Crime Offenders Registration Act.

(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 policies and procedures, and volunteer interviews.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19]

75:15-13-13. Supervision of volunteers

(a) The program shall establish in writing lines of supervision for all volunteers.

(b) The program shall ensure each volunteer has the knowledge relevant to the volunteer's job duties and is supervised pursuant to program policies and procedures.

(c) Compliance with 75:15-13-13 shall be determined through a review of the program's policies and procedures, and any other supporting documentation provided including, but not limited to, volunteer manuals, and organizational charts.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18]

75:15-13-14. Volunteer records

(a) The program 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.

[Source: Added at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

PART 3. TRAINING

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

[Source: Transferred from 450:19-13-20 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

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

(a) A certified program shall provide a minimum of 30 hours of orientation training that incorporates the use of adult learning techniques (i.e., scenarios, role playing, shadowing) 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 policies 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) Power and control tactics of abuse;
- (10) Dangerousness and lethality assessment including strangulation and head trauma;
- (11) Crisis intervention techniques;
- (12) Sexual assault;
- (13) Stalking;
- (14) Victim advocacy;
- (15) Parenting and disciplinary techniques for children who have been exposed to domestic violence and trauma;
- (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 special needs, including cognitive disabilities or who are deaf or hard of hearing, non-English speaking persons, or undocumented immigrants to include basic information on U visas and T visas;
- (18) Safety planning for adults and age appropriate safety planning for children;
- (19) Basic child development;
- (20) Legal and ethical issues;
- (21) Cultural Sensitivity;
- (22) Effects of trauma including post-traumatic stress disorder;
- (23) Victim's use of force; and

(24) Documentation of services.

(b) Staff and 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, 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 it is documented that the staff or volunteer has completed the requisite program training within the past year.

(d) Program directors shall attend New Director Orientation and training offered by the Oklahoma Office of the Attorney General, within the first six months of employment.

(e) 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.

[Source: Transferred from 450:19-13-20.1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-13-20.2. In-service and ongoing training for personnel and volunteers

(a) A certified program shall have policies 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;
- (5) Client rights;
- (6) Legal and ethical issues; and
- (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 policies and procedures mandating a minimum of 16 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) Staff and volunteers who provide indirect services and do not meet the requirements for staff and volunteers 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) Compliance with 75:15-13-20.2 shall be determined by a review of policies and procedures; review of training records and other provided documentation of personnel training; and a review of personnel or volunteer records.

[Source: Transferred from 450:19-13-20.2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 38 Ok Reg 1691, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-13-21. [RESERVED]

75:15-13-22. [RESERVED]

75:15-13-23. [RESERVED]

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 75:15-13-24 shall be determined by:

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

[Source: Transferred from 450:19-13-24 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

(a) Prior to providing any direct services or CLEET training, all sexual assault services staff or volunteers shall receive a minimum of six (6) hours classroom training in addition to basic orientation which shall include, but not be limited to:

- (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, same sex, bisexual or transgender victims, non-English speaking, undocumented immigrants, victims with cognitive disabilities or who are deaf or hard of hearing; and
- (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 policies and procedures;
- (2) Review of program's training records and other provided documentation of staff or volunteer training; and
- (3) Review of personnel or volunteer records.

[Source: Transferred from 450:19-13-25 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18]

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 in 75: 15-13-20.1.

(b) The program shall have policies and procedures mandating a minimum of sixteen (16) hours annual training for transitional living services personnel.

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

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

[Source: Transferred from 450:19-13-26 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 26 Ok Reg 2426, eff 7-11-09 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

75:15-13-27. Provider training, Safe Home services [REVOKED]

[Source: Transferred from 450:19-13-27 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

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

[Source: Transferred from 450:19-13-28 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Revoked at 24 Ok Reg 2508, eff 7-15-07]

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

[Source: Transferred from 450:19-13-29 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 27 Ok Reg 1709, eff 7-1-10 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

[Source: Transferred from 450:19-13-30 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Revoked at 27 Ok Reg 1709, eff 7-1-10]

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 by-laws 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;
- (7) Establishment of a quorum; and
- (8) Conflict of interest agreement.

(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; and
- (3) Review of the governing authority's minutes.

[Source: Transferred from 450:19-15-1 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

[Source: Transferred from 450:19-15-2 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

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 policies for the operation of the agency, and ensuring procedures for the implementation of policies 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 any plans of correction; and
- (8) Oversee the financial administration of the program, including review and approval of financial audits.

(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.

[Source: Transferred from 450:19-15-3 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 36 Ok Reg 1379, eff 9-13-19]

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.

[Source: Transferred from 450:19-15-4 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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 policies 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 and stalking;
 - (8) Open Meeting Act and recording of meeting minutes;
 - (9) Open Records Act;
 - (10) Rules, including standards and criteria to ensure multi-cultural needs of clients are met, 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 policies and procedures, training materials, training records, and minutes of meetings.

[Source: Added at 25 Ok Reg 1838, eff 7-1-08 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

SUBCHAPTER 17. CLIENTS RIGHTS

75:15-17-1. Applicability

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

[Source: Transferred from 450:15-3-70 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 33 Ok Reg 1195, eff 9-11-16]

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

[Source: Transferred from 450:15-3-71 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Revoked at 23 Ok Reg 2200, eff 7-1-06]

75:15-17-3. Client Rights

(a) Each client shall be afforded 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 the client from harm, abuse, and neglect;
- (4) Each client has the right to an environment that provides reasonable privacy, promotes personal dignity, and provides physical and emotional safety;
- (5) Each client has the right to receive services suited to the client's needs without regard to race, sex, color, age, national origin, genetic information, religion, degree of disability, or legal status;
- (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 the client's 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 free exercise of 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 offered prompt, competent, appropriate services and an individualized service plan. The client shall be afforded the opportunity to participate in the creation of the client's service plan. The client may consent or refuse to consent to the proposed services;

(12) The records of each client shall be confidential. This confidentiality remains intact even after the client's death;

(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 be subject to any adverse conditions or services solely or partially because of having asserted the rights stated in this section;

(16) Upon request, each client has the right to review the client's own records. Upon written request, each client has a right to receive a copy of the client's own records or authorize an attorney or other person to do so. The program must provide a copy within a reasonable amount of time. The portion of the client's records regarding mental health or substance abuse treatment, may only be released pursuant to the provisions of 43A O.S. § 1-109 and 42 CFR shall apply;

(17) Each client has the right to know why services are refused and can expect an explanation concerning the reason why the client was refused particular services;

(18) Each client has the right to voluntary services that are self-determined; and

(19) Each client has the right to decide whether or not to participate in supportive services offered by the program.

(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 policies to ensure each client has received explanation of these rights.

(d) Client rights shall be visibly posted in client areas of the facility.

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

(f) Compliance with 75:15-17-3 and applicable federal laws and regulations shall be determined by a review of program policies and procedures, client records, on-site observation, written agreements, and/or other program documentation.

[Source: Transferred from 450:15-3-72 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 29 Ok Reg 1759, eff 8-11-12 ; Amended at 30 Ok Reg 1915, eff 7-25-13 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 35 Ok Reg 863, eff 9-14-18 ; Amended at

75:15-17-4. Client grievance policies 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 as follows:
 - (A) Transitional living and shelter services timeframes for resolution of grievances by program staff or volunteers shall be seven (7) days unless appealed; and
 - (B) Non-transitional living and non-shelter services timeframes for resolution of grievances by program staff or volunteers 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 with the authority to make decision(s) for resolution of the 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 VASU;
- (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, including the phone number, mailing address, and email address of the VASU;
- (6) Mechanism to monitor the grievance process and improve performance based on outcomes; and
- (7) Annual review of the grievance policies and procedures, with revisions as needed.

(b) Compliance with 75:15-17-4 shall be determined by a review of program policies and procedures, client records, on-site observation, written agreements, and/or other program documentation.

[Source: Transferred from 450:15-3-73 by SB 236 (2005), eff 7-1-05 (Editor's Notice published at 22 Ok Reg 2667); Amended at 23 Ok Reg 339, eff 11-8-05 (emergency); Amended at 23 Ok Reg 2200, eff 7-1-06 ; Amended at 24 Ok Reg 2508, eff 7-15-07 ; Amended at 28 Ok Reg 1906, eff 7-11-11 ; Amended at 31 Ok Reg 804, eff 9-12-14 ; Amended at 33 Ok Reg 1195, eff 9-11-16 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 18. CODE OF PROFESSIONAL ETHICS

75:15-18-1. Applicability

This section is applicable to domestic violence, sexual assault and stalking programs and shelters certified by the OAG pursuant to 74 O.S. §§ 18p-1-18p.6.

[Source: Added at 42 Ok Reg, Number 20, effective 7-11-25]

75:15-18-2. Code of Professional Ethics

(a) Employees and volunteers of domestic violence, sexual assault, and stalking programs certified pursuant to 74 O.S. §§ 18p-1-18p-6 have an ethical obligation to their clients.

(b) Each program shall adopt a written Code of Professional Ethics. The Code shall encompass behavioral expectations and underlying philosophy set forth in subchapter 1, section 1.1 of this Chapter.

(c) At minimum, the Code of Professional Ethics shall include the following ethical standards:

(1) Confidentiality and Privacy, including legal and ethical obligations to clients with respect to internal and external entities;

(2) Guiding Values, including empowerment and autonomy, self-determination, integrity, compassion, empathy, non-judgment, respect for people's rights and dignity, and client-centered practice;

(3) Professional Competence, including knowledge, skills, experience, evidence-based and trauma-informed practices, cultural responsiveness, ongoing education, scope of competence, and duty to report the unethical conduct of colleagues to supervisors;

(4) Professional-Client Relationships, including boundaries, and conflicts of interest; and

(5) Social Responsibility, including non-discrimination, and fostering anti-oppressive, equitable, inclusive, safe, trauma responsive, non-violent environments.

(d) Compliance with this section shall be determined by a review of the written program policies and procedures, personnel files, training records, and/or other program documentation.

[Source: Added at 42 Ok Reg, Number 20, effective 7-11-25]

CHAPTER 20. ADDRESS CONFIDENTIALITY PROGRAM

Editor's Note: *Effective 7-1-08, the rules in this Chapter were transferred from Chapter 30 in the Secretary of State's Title 655 [OAC 655:30-1-1 through 655:30-1-15]. Pursuant to House Bill 2638 (2008), "rules promulgated by the Office of the Secretary of State to implement [the Address Confidentiality Program] shall be transferred to and become part of the administrative rules of the Office of the Attorney General. . . . Such rules shall continue in force and effect as rules of the Office of the Attorney General from and after July 1, 2008, and any amendment, repeal, or addition to transferred rules shall be under the jurisdiction of the Attorney General" [House Bill 2638 (2008)]. As directed by HB 2638, an Editor's Notice was published in the Oklahoma Register [see 25 Ok Reg 2607], announcing the transfer of the rules from OAC 655:30 to this Chapter [OAC 75:20], and identifying the new location in this Chapter of each transferred rule. For additional information relating to this transfer, see House Bill 2638 (2008).*

[**Authority:** 22 O.S., § 60.14]

[**Source:** Codified 7-1-08]

75:20-1-1. Purpose

This chapter establishes administrative procedures necessary to implement the Address Confidentiality Program.

[**Source:** Transferred from 655:30-1-1 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607)]

75:20-1-2. Definitions

The following words and terms, when used in this Chapter, shall have the following meaning, unless context clearly indicates otherwise.

"**ACP**" means Address Confidentiality Program.

"**Address Confidentiality Program**" means the statutorily created program responsible for implementing the provisions of 22 O.S., §§ 60.14 et. seq. within the Office of the Oklahoma Attorney General.

"**Application Assistant**" means a volunteer or employee of a designated agency that has been trained and registered by the Office of the Oklahoma Attorney General to assist individuals in the application process.

"**Authorization Card**" means the card issued by the ACP Program Manager to a program participant upon certification identifying them as a program participant.

"**Authorization Number**" means a number assigned to a program participant by the ACP Program Manager upon certification.

"**Certification**" means the process by which an applicant is determined eligible to participate in the program.

"**Designated Agency**" means a state or local agency, federal government, a federally recognized tribal government agency, or a nonprofit agency that provides counseling, shelter, or other services to victims of domestic abuse, sexual assault, human sex trafficking, or stalking that has been identified by the Office of Attorney General as a

place where persons apply to be program participants.

"Minor" means a person who is less than eighteen (18) years of age.

"Program Manager" means the employee of the Victim Services Unit of the Office of Attorney General designated by the Oklahoma Attorney General to administer the Address Confidentiality Program.

"Record" means a public record as defined in 51 O.S., § 24A.3.

"Substitute Mailing Address" means the address assigned to a program participant by the Victim Services Unit of the Office of Attorney General.

[Source: Transferred from 655:30-1-2 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 38 Ok Reg 1697, eff 9-11-21]

75:20-1-3. Forms and informational material

The Attorney General has prepared the following forms and informational materials related to this Chapter:

- (1) Application Assistant Agreement Form
- (2) Application Assistant Training Manual
- (3) Application Assistant Guide
- (4) Address Confidentiality Program Application
- (5) Program Agreement
- (6) Authorization Card Form
- (7) Change of Address Form
- (8) Address Confidentiality Program Brochure
- (9) ACP Implementation in Public Schools
- (10) Participant Verification Form

[Source: Transferred from 655:30-1-3 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 36 Ok Reg 1386, eff 9-13-19]

75:20-1-4. Application assistants

(a) Prior to being designated as an application assistant, an individual must:

- (1) Attend required training sessions provided by the ACP;
- (2) Agree to adhere to the policies, procedures and directions provided by the ACP for rendering assistance to program applicants; and
- (3) Complete and sign an application assistant agreement form.

(b) Upon completion of the registration process, the ACP will notify the application assistant of such designation.

(c) Designation as an application assistant is valid for two years.

(d) The application assistant agrees not to discriminate against any client, or potential program participant, because of race, creed, color, national origin, gender, sexual orientation, age, or mental, physical or sensory disability.

(e) An application assistant is not deemed to be an employee of the Office of Attorney General nor an agent of the Office of Attorney General in any manner whatsoever. An application assistant shall not hold

himself/herself out as, nor claim to be an officer or employee of the Office of Attorney General or the State of Oklahoma and shall not make any claim, demand, or application to or for any right or privilege applicable to an officer or employee of the Office of Attorney General or of the State of Oklahoma.

(f) In the event an application assistant no longer wishes to be designated as such or leaves his or her present position, the application assistant shall provide written notification to the ACP Program Manager.

(g) An application assistant's designation may be canceled by the Office of Attorney General for failing to abide by the requirements set forth in this Section or for failing to act in accordance with the requirements of the Address Confidentiality Program.

[Source: Transferred from 655:30-1-4 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 36 Ok Reg 1386, eff 9-13-19]

75:20-1-5. Criteria for program participation

To participate in the Address Confidentiality Program, an individual must meet the following criteria:

- (1) A person attempting to escape from actual or threatened domestic violence, sexual assault, human sex trafficking, or stalking, or a person residing with another person who is attempting to escape from actual or threatened domestic violence, sexual assault, human sex trafficking, or stalking;
- (2) Fears for his or her safety and/or the safety of other family members;
- (3) Recently established a residence address in Oklahoma unknown to the abuser or is planning to move in the near future;
- (4) Is eighteen (18) years of age or older or a parent or guardian acting on behalf of a minor or incapacitated person; and
- (5) Agrees to all of the terms in the Program Agreement checklist.

[Source: Transferred from 655:30-1-5 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 36 Ok Reg 1386, eff 9-13-19 ; Amended at 38 Ok Reg 1697, eff 9-11-21]

75:20-1-6. Applying for participation

(a) Any person meeting the criteria to be a program participant who wishes to apply to the Address Confidentiality Program shall complete the required application packet. The application packet consists of an Address Confidentiality Program Application and a Program Agreement.

(b) The application packet shall be obtained from an Application Assistant at a designated agency to assist persons in the application process.

(c) The completed and signed application packet shall be filed with the ACP.

(d) *Any assistance or counseling rendered to applicants shall in no way be construed as legal advice.* [22 O.S., § 60.14(H)]

[Source: Transferred from 655:30-1-6 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ;

Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 36 Ok Reg 1386, eff 9-13-19]

75:20-1-7. Certification

(a) Upon approval of the completed application by the ACP, the applicant is certified as a program participant, assigned a substitute address, and issued an authorization card. The authorization card includes the program participant's name, date of birth, authorization number, substitute mailing address, certification expiration date, and participant's signature.

(b) The term of a program participant's certification shall be four (4) years.

[**Source:** Transferred from 655:30-1-7 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-8. Certification renewal

(a) A program participant may renew program certification by filing with the ACP the following information:

- (1) The participant's current authorization card;
- (2) A properly completed renewal application; and
- (3) A new signed authorization card.

(b) The term of renewal shall be an additional four (4) year term.

[**Source:** Transferred from 655:30-1-8 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-9. Certification withdrawal and cancellation

(a) A program participant may withdraw from participating in the program by submitting to the ACP written notice of withdrawal and his or her current authorization card. The withdrawal will be effective on the day of receipt of the notification by the ACP.

(b) The ACP Program Manager shall cancel a program participant's certification and invalidate his or her authorization card if:

(1) A program participant's certification term has expired and a renewal application has not been filed.

(2) A program participant knowingly provided false or incorrect information when applying for certification.

(3) A program participant obtains a name change.

(c) The Program Manager may cancel a program participant's certification for any of the following reasons:

(1) The program participant no longer resides at the residential address listed on the application and has not provided written notice after the change in address has occurred.

(2) Mail forwarded to the participant is returned non-deliverable or unclaimed.

(3) A program participant has failed to abide by the requirements of the Address Confidentiality Program as outlined in the Program Agreement checklist and has been notified in writing two (2) times at the last known mailing or residential address.

(d) The ACP shall attempt to notify the participant of the cancellation at the last known mailing or residential address, by phone or by email.

[Source: Transferred from 655:30-1-9 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16 ; Amended at 36 Ok Reg 1386, eff 9-13-19 ; Amended at 38 Ok Reg 1697, eff 9-11-21]

75:20-1-10. Use of the substitute address

(a) The substitute address serves as the participant's residence, school, and work address.

(b) When creating state and local government or tribal records or updating existing records, a program participant shall show the participant's authorization card to the agency and request address confidentiality using the substitute address.

(c) The agency employee assisting the program participant may make a file photocopy of the authorization card.

(d) The agency shall accept the substitute address unless the agency has received a written exemption from the Office of Attorney General. See OAC 75:20-1-14.

(e) The agency shall not question the program participant about the details or circumstances of the participant's inclusion in the program.

(f) All mail addressed to the participant at the substitute address shall include the authorization number appearing on the participant's authorization card.

(g) Mail received at the substitute address will be forwarded by the ACP Program Manager at no charge to the participant at the participant's actual mailing address with the exception of magazines, books,

periodicals, packages, and junk mail.

(h) Delivery of a participant's mail may be delayed as much as three (3) to five (5) days. It is important to remember this fact when sending time sensitive documents to a participant.

(i) The Office of Attorney General shall not be required to track or otherwise maintain records of any mail received on behalf of a participant unless the mail is certified or registered.

[Source: Transferred from 655:30-1-10 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-11. Public schools

(a) At the time of enrollment, a student participating in the ACP shall go to the school's administrative office for assistance and present the student's authorization card.

(b) The school shall contact the ACP Program Manager and request verification of enrollment eligibility.

(c) Eligibility for enrollment will be determined using the residence address shown in the participant's records.

(d) The ACP will notify the school of its findings both verbally and in writing.

(e) If questions are raised regarding the student's eligibility, the ACP Program Manager will work directly with the school superintendent or the superintendent's designee to resolve the matter.

(f) All school correspondence mailed to the student and/or the student's parent or guardian shall be sent to the substitute address.

(g) Requests for the transfer of a student's records from one school to another shall be handled by the ACP Program Manager upon written authorization from the parent or guardian.

[Source: Transferred from 655:30-1-11 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-12. Voter registration

(a) An ACP participant who is otherwise qualified to vote may register to vote as an ACP participant voter through the State Election Board. [OAC 230:15-5-83.1]

(b) ACP participants who become registered as ACP participant voters may vote only by absentee ballot. ACP participant voters will receive absentee ballots by mail at the participant's substitute address for all local, state and national elections in which the participant is eligible to vote. [OAC 230:15-5-83.1(a)]

(c) All records pertaining to an ACP participant voter shall be maintained in a manner ensuring these records are accessible only to authorized personnel and shall not be publicly accessible.

(d) The name, address, precinct number, and absentee ballots of any ACP participant voter shall not be released to any person for any purpose except by court order. Additionally, the name, address, precinct number, and absentee ballots of any ACP participant voter shall not appear on any list or report produced by either the State Election Board

or County Election Board. [OAC 230:15-5-73(d)]

(e) The ACP shall notify the State Election Board when an ACP participant voter's:

- (1) program certification has expired;
- (2) program certification has been withdrawn or canceled;
- (3) absentee ballot is returned non-deliverable;
- (4) residence address changes.

[Source: Transferred from 655:30-1-12 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-13. Service of process

(a) The Victim Services Unit of the Office of Attorney General is designated as agent for service of process and receipt of mail for all ACP participants.

(b) Service on the Office of Attorney General of any summons, writ, notice, demand or process can be made by mailing to the substitute address or by delivering in person to the Victim Services Unit of the Office of Attorney General, 313 NE 21st Street, Oklahoma City, OK 73105.

(c) When a summons, writ, notice, demand or process is served on the Office of Attorney General, the ACP Program Manager shall immediately forward a copy to the program participant by first-class mail at the participant's current mailing address shown on the ACP records.

(d) The ACP Program Manager shall maintain in the program participant's file, a record of all summonses, writs, notices, demands, and processes served upon the Office of Attorney General for that participant, which shall include the date of such service and the action taken.

[Source: Transferred from 655:30-1-13 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-14. Agency exemption

(a) An agency requesting an exemption under 22 O.S. § 60.14(F) must provide in writing to the Office of Attorney General the following:

- (1) Identification of the statute or administrative rule that demonstrates the agency's bona fide requirement and authority for the use of the actual address of the participant;
- (2) Identification and description of the specific record for which the exemption is requested;
- (3) Identification of the individual(s) who will have access to the record;
- (4) An explanation of how the acceptance of a substitute address will prevent the agency from meeting its obligations under the statute or rule identified above; and
- (5) An explanation of why the agency cannot meet its statutory or administrative obligations by a change in its internal procedures.

(b) The determination of the Office of Attorney General to grant or deny a request for exemption will be based on, but not limited to, an evaluation of the information provided under this Section.

(c) If the Office of Attorney General determines that an agency has a bona fide statutory or administrative requirement for the use of a program participant's actual address and that the address will be used only for those statutory and administrative purposes, the Office of Attorney General may issue a written exemption for the agency. The written exemption may include:

- (1) An agency's obligation to maintain the confidentiality of a program participant's address;
- (2) Limitations on the use and access to the address;
- (3) Term during which the exemption is authorized for the agency;
- (4) Designation of the record format on which the address information may be maintained;
- (5) Designation of an address information disposition date after which the agency may no longer maintain a record of the address information.
- (6) Any provisions and qualifications determined appropriate by the Office of Attorney General.

(d) The denial by the Office of Attorney General of an agency exemption request shall be made in writing and include a statement of the specific reasons therefore.

(e) The Office of Attorney General shall keep a record of all exemptions and all documentation relating to requests for exemption.

[Source: Transferred from 655:30-1-14 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 33 Ok Reg 1215, eff 9-11-16]

75:20-1-15. Disclosure of records

(a) The Office of Attorney General shall not make any records in a program participant's files available for inspection or copying unless directed by a court order to the person identified in the order. [22 O.S., § 60.14(G)] The participant information disclosed to a person identified in a court order shall be maintained in strict confidentiality by the party receiving the information.

(b) The Office of Attorney General may verify the participation of a specific program participant to state, local, federal or tribal government agencies, in which case the Office of Attorney General may only confirm information supplied in writing to the Office of Attorney General by the requestor. State or local agencies are prohibited from knowingly and intentionally disclosing a program participant's actual address unless disclosure is permitted by law.

(c) The substitute address assigned to an ACP participant is not confidential.

(d) The ACP Program Manager shall provide immediate notification of disclosure to the ACP participant when disclosure takes place, if not otherwise prohibited by law.

[Source: Transferred from 655:30-1-15 by HB 2638 (2008), eff 7-1-08 (Editor's Notice published at 25 Ok Reg 2607); Amended at 26 Ok Reg 2434, eff 7-11-09 ; Amended at 28 Ok Reg 1921, eff 7-11-11 ; Amended at 33 Ok Reg 1215, eff 9-11-16]

CHAPTER 25. STANDARDS AND CRITERIA FOR BATTERERS INTERVENTION PROGRAMS

[**Authority:** 74 O.S. § 18p-6]

[**Source:** Codified 7-1-10]

SUBCHAPTER 1. GENERAL PROVISIONS

75:25-1-1. Purpose

The purpose of this chapter is to set forth the standards and criteria governing services provided by certified batterers intervention programs. 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.

[**Source:** Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11]

75:25-1-2. Mission

The mission of the standards and criteria for batterers intervention programs is to eliminate domestic violence, sexual assault and stalking in the State of Oklahoma.

[**Source:** Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12]

75:25-1-2.1. Underlying Philosophy

The philosophy underlying the standards and criteria for batterers intervention programs is that:

- (1) battering is instrumental, strategic and purposeful behavior designed to bring about a particular outcome;
- (2) traditional therapeutic techniques are not appropriate for those who choose to batter;
- (3) battering is primarily a sociocultural issue that is criminal in nature;
- (4) battering is never justified;
- (5) battering is not caused by disease, diminished intellect, alcoholism/addiction, intoxication, mental illness or any external person or event;
- (6) batterers are solely responsible for their actions and must be held accountable for their abusive behavior;
- (7) the use of violence and coercion is a choice, decision or a tactic;
- (8) no behavior of the victim causes or excuses domestic violence;
- (9) because batterers choose to use violence, they can also choose to stop violence and eliminate coercive controlling tactics from their intimate relationships; and
- (10) safety for the victims/survivors and their dependents is the primary focus of intervention and services.

[Source: Added at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18]

75:25-1-3. 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.

"Americans with Disabilities Act of 1990" including, but not limited to the deaf and hard of hearing, blind, physically disabled, developmentally disabled, persons with disabling illness, and persons with mental illness. See "Americans with Disabilities Handbook", published by U.S. Equal Employment Opportunity Commission and U.S. Department of Justice.

"Assessment" means the process of evaluating an individual to determine needs for services and appropriateness of admission to the program.

"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 Program" (BIP) means a status which is granted to an entity by the Oklahoma Office of the Attorney General. These services hold a batterer accountable for abusive behavior, provide consequences for engaging in ongoing violent or abusive behavior, provide monitoring of a batterer's behavior, and require the client to

change battering behavior and attitudes. BIP's shall keep victim's safety in the forefront. Anger control or management, substance abuse treatment or mental health treatment alone or in combination with each other shall not constitute batterers intervention; neither of these interventions, alone nor in combination with each other, should be utilized as the primary means of facilitating the required changes in behavior and attitudes.

"Battering" means a pattern of behavior used to establish power and control over another person through fear and intimidation, often including the threat or use of violence.

"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.

"Certified batterers intervention program" Indicates approval to provide batterers intervention 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."

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

"Client" means an individual who has applied for, is receiving or has received assistance or services of a batterer's intervention program.

"Client record" includes, but is not limited to, all communication, records and information on an individual client.

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

"Coordinated Community Response Team" means a multi-disciplinary group of individuals from agencies and programs in the community whose purpose is to keep victims safe and hold batterers accountable.

"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. 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.

"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.

"DVSA" 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 a pattern of abusive behavior in any relationship that is used by a batterer to gain or maintain power and control over a current or former partner or family member. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.

"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.

"Executive Director" means the person hired by the governing authority to direct all the activities of the organization. May be referred to as "Chief Executive Officer".

"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.

"Intake" means the process of obtaining written information about a client for entry into services, obtained by the program at time of admission.

"Lethality risk indicators" means evidence-based risk factors commonly associated with lethal intimate partner violence such as those listed in 21 O.S. § 142A-3:

- (A) Has the person ever used a weapon against the victim or threatened the victim with a weapon?
- (B) Has the person threatened to kill the victim or children of the victim?
- (C) Does the victim think the person will try to kill the victim?
- (D) Has the person ever tried to choke the victim?
- (E) Is the person violently or constantly jealous or does the person control most of the daily activities of the victim?
- (F) Has the victim left or separated from the person after living together or being married?
- (G) Is the person unemployed?
- (H) Has the person ever tried to kill himself or herself?
- (I) Does the victim have a child that the person knows is not his or her own child?

(J) Does the person follow or spy on the victim or leave the victim threatening messages?

(K) Is there anything else that worries the victim about his or her safety and if so, what worries the victim?

"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.

"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.

"Non-abusive behavior" means behavior that is absent of violence, coercion, control or abuse.

"OAG" means the Oklahoma 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

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

"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.

"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.

"Service Agreement" means a written agreement between service agencies and/or individual service providers defining the roles and responsibilities of each party to promote coordination and integration of service.

"Service note" means the documentation of the time, date, location and description of services provided, and signature, including electronic signature, of staff or volunteer providing the services.

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

"Victim" is an individual against whom the client perpetrates domestic violence. Individuals may include partners, former partners, children and other family or household members.

"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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-1-4. 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-1-5. Annual review of standards and criteria

This chapter shall be reviewed annually by the OAG.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11]

SUBCHAPTER 3. BATTERERS INTERVENTION

75:25-3-1. Batterers intervention program

(a) Each certified batterer intervention program shall have the policy, procedures, staffing, training, operational methods and facilities to meet the following requirements:

- (1) Batterers intervention programs are educational programs based on a model of power and control designed to encourage batterers to end violent and coercive behaviors in their relationships by challenging their belief systems and holding them accountable for their behavior.

(2) Program focus shall be victim safety and batterer accountability. The service shall be based on non-victim blaming strategies.

(3) Batterers intervention shall not be confused with anger control or management, substance abuse treatment and/or mental health treatment.

(4) Services shall be provided in a facility with offices available for private individual and group sessions.

(5) Services shall be provided to self-referred, court-referred, or Department of Human Services referred batterers. Group services shall be the primary modality.

(6) Groups shall not provide substance abuse treatment and batterers intervention in the same program; batterers who have substance abuse issues need to be referred for separate substance abuse services.

(7) The majority of group session time should be focused on the subject abuse itself, and not on peripheral problems, past victimization experienced by the client, self-actualization, sensitivity training, or any other theme not directly related to abuse.

(8) Facilitators shall challenge minimization, denial and blame. These are tactics used by the client to justify the use of violence.

(9) Clients shall be held accountable for their behavior; BIP facilitators shall report new offenses to the court.

(b) The goal of the batterer's intervention program is to end the client's abusive behavior. This shall be achieved by confronting and dispelling the individual batterer's justifications for the use of violence within the relationship. Particular attention shall be paid to the belief systems that promote the use of intimidation, violence and coercion against intimate partners and children. Theories or methods which attribute to the victim any responsibility for the client's behavior or diminish the client's responsibility for the violence are inappropriate. Education shall be provided to the client utilizing written curriculum specifically developed for batterers intervention that comprehensively addresses, at a minimum:

(1) abuse and violence as a form of control, and an explanation of the need to give up all forms of controlling and coercive behavior;

(2) a detailed explanation of the range of abusive power and control behaviors, including coercive behavior, chronic verbal abuse, economic abuse, sexual abuse/mistreatment, psychological/mental abuse, physical abuse, abuse of animals, and use of the children as weapons;

(3) support for and perpetuation of abuse are based on traditional gender roles and privilege.

(4) non-abusive communication techniques;

(5) effective coping strategies;

(6) the impact of battering on children and the incompatibility of violence and abuse with responsible parenting;

(7) the client must be able to identify all abusive conduct, the pattern of that conduct, and the culture which legitimizes or excuses both individual acts and the larger pattern of battering.

This may include but not be limited to accepting personal as well as financial responsibility for child support, court costs, restitution, and BIP related costs;

(8) developing healthy relationships; including techniques for achieving non-abusive, non-controlling attitudes and behavior.

(9) non-abusive behavior planning for the prevention of violent, controlling and abusive behavior;

(10) effects of domestic violence on victims from a victim perspective, and

(11) the potential consequences of domestic violence to the client.

(c) Inappropriate Methods of Intervention. The following methods have been determined to be inadequate and/or inappropriate, and shall not be the focus of intervention:

(1) therapy, whether psycho-dynamic, individual or group;

(2) communication enhancement, anger management or stress management techniques that blame anger as the root cause of domestic violence;

(3) systems theory approaches that treat domestic violence as a result of mutual actions of the victim and batterer, thereby attributing some responsibility to the victim;

(4) addiction counseling models that identify domestic violence as an addiction;

(5) gradual containment and de-escalation of domestic violence;

(6) theories that identify poor impulse control as the primary cause of domestic violence;

(7) methods that identify psychopathology on either parties' part as a primary cause of domestic violence; and

(d) Services shall be provided during hours which make them available for clients whose work hours are between 8:00 A.M. and 5:00 P.M. Monday through Friday.

(e) The program shall maintain admission criteria for batterers intervention services.

(f) The program shall provide individual assessment sessions and group sessions.

(g) Service policy shall not permit the substitution of individual sessions/counseling appointments for group participation except in a situation where only one batterer of a gender has been accepted into the program.

(h) Group sizes shall be limited to not less than two (2) and not more than sixteen (16) clients.

(i) Exit criteria shall be contingent on the satisfactory meeting of specific criteria by the participant, and not merely upon the end of a specified period of time or a specified number of sessions.

(j) Joint participation shall not be allowed of the victim as part of batterers intervention.

(k) Male and female batterers shall not be served in the same group or session.

(l) The program shall maintain an annually renewed service agreement with appropriate referral sources such as, but not limited to:

(1) substance abuse;

(2) mental health services; and

- (3) local OAG-certified domestic violence victim services.
- (m) In the case of court referred clients, the program shall develop a written policy for coordinating with and reporting to the court, judge, probation officer, child welfare worker and/or district attorney.
- (n) In the case of non-court referred clients, the program shall develop a written policy for reporting client information, including but not limited to, assessment results, participation in services, reason for exit and concerns related to the safety of the victims or children.
- (o) If other services for the client are necessary, appropriate referrals shall be made for such issues, including but not limited to mental health and/or substance abuse issues.
- (p) Certified batterer intervention programs shall not be less than 52 weeks in duration. The 52 weekly group sessions shall be no less than ninety (90) minutes in length. Completion of a batterer's intervention program requires at a minimum 52 weekly attended sessions as well as a favorable evaluation from the program.
- (q) The batterer's intervention program shall not allow three unexcused (3) absences in succession or a total of seven unexcused (7) absences in a period of fifty-two (52) weeks. The client shall be terminated from the program as per 21 O.S. § 644 and the court or other referring party shall be notified of the termination. Excused absences are:
- (1) Hospitalization or medical restriction from attending program session(s) (verified by proper medical documentation);
 - (2) Military Duty (verified by proper military documentation);
 - (3) Attending the birth of his or her child, if legally permitted to do so (occurring the week of the birth and verified by proper documentation);
 - (4) Attending the funeral of an immediate family member such as a spouse/partner, child/dependent, parent, or grandparent (occurring the week of the funeral and verified by proper documentation);
 - (5) Attending a court hearing pertaining only to the existing criminal case or DHS welfare deprived case (verified by proper documentation); or
 - (6) Inclement weather as determined at the discretion of the certified program.
- (r) Certified batterer intervention programs shall provide assessment, intake, and exit interview services exclusively in person. Certified batterer intervention programs shall provide in person weekly group sessions, in addition to any offering of virtual group sessions, as the exclusive use of virtual platforms to facilitate group is not acceptable. Programs with a Temporary Certification shall only be eligible to offer virtual group sessions following successful completion of the certification process and upon being granted Certification as defined in chapter 1 of this title. Certified programs that desire to offer virtual group sessions shall make an application to offer this provision of services to the Office of Attorney General on a form provided by the Victim Advocacy and Services Unit prior to offering any virtual group sessions under any of the following circumstances:
- (1) If the client resides or works in a county that does not have a certified batterer intervention program, and the nearest certified

program is over forty-five (45) miles from their residence or work site;

(2) If the client has an occupation that requires that they regularly, and physically work away from the nearest certified program more than two weeks in succession per month;

(3) If the client has accessibility or accommodation needs to address consistent lack of transportation and/or disability; or

(4) If the program has outlined in an inclement weather policy procedures for offering virtual group sessions.

(s) Programs utilizing platforms to allow clients to participate in group sessions virtually shall develop specific written policies and procedures regarding such programming. Policies and procedures shall include, at a minimum, virtual specific considerations of the following:

(1) Victim safety;

(2) Assignment of a trained facilitator to every virtual group;

(3) Facilitators shall provide at least twelve (12) in-person group sessions before being eligible to facilitate virtual group;

(4) Group size of no less than two (2) and no more than ten (10) participants; and

(5) Provision of services are certified solely pertaining to the State of Oklahoma, and group rules and expectations.

(t) Programs shall document reason(s) as to why an individual was placed in a virtual group instead of an in-person group offered by the program, including evaluation of individual participant needs, and victim;

(u) To the extent possible, group format should remain consistent for the duration of the participant's time in the program; and

(v) Participants must agree to abide by the program standards and rules, including any additional rules specific to virtual group sessions, such as:

(1) Cameras must remain on;

(2) Internet must be stable;

(3) Appropriate equipment to participate virtually including a camera, headphones, microphones, speakers, or other devices necessary to ensure that the participant can be seen and heard and can hear the facilitator and other participants;

(4) No drinking alcohol, smoking, vaping, or chewing tobacco during the session;

(5) No driving during the session;

(6) No eating food during the session;

(7) Participants must be fully clothed during the session and show a 360-degree view (full view) of the room they are in to ensure they are alone for the session's duration;

(8) The group is confidential and shall not be recorded;

(9) Cell phones shall be turned off or silenced during the group session;

(10) The device on which a participant attends session must be full charged and updated;

(11) Participants shall not check email, other mobile phone applications, or do other tasks during group session.

(12) Participants shall take precautions to ensure no interruptions of the session by animals or household members, including children, shall occur.

(w) If the client is terminated for any reason as set forth herein, the batterer shall be required to obtain a new assessment and commence a new fifty-two (52) week program. No credit for prior program attendance shall be allowed. Termination from a program terminates any and all credits accumulated by said batterer.

(x) Compliance with 75:25-3-1 shall be determined by a review of program policy and procedures; client records; service agreements, and other program documentation.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-3-2. Victim safety and confidentiality [REVOKED]

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Revoked at 35 Ok Reg 871, eff 9-14-18]

75:25-3-3. Client records

(a) A certified program that uses hand written records shall have written policy and procedures for correcting errors on hand written 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.

(b) Each client record entry shall be legible, dated, and signed by the staff member or volunteer making the entry.

(c) Copies of all service documentation including assessments, exit interviews and reports shall be kept in the client's file.

(d) Compliance with 75:25-3-3 shall be determined by on-site observation, client records, policy and procedures and any other supporting program documentation.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-3-4. Assessment

An assessment shall be completed prior to service recommendations or acceptance into the program. Before the assessment begins, the individual shall sign acknowledgment that they are participating in a batterer's intervention program assessment which is an educational program, not a therapeutic program, and will not have the same level of confidentiality afforded by mental health services. The program will not assure confidentiality of the assessment results with respect to the Judge, District Attorney, referring agency, or victim(s). The assessment shall at a minimum contain:

- (1) client's name;
- (2) date of assessment;
- (3) address;
- (4) phone number;
- (5) current and past history of violence;

- (6) lethality risk indicators using an evidence-based instrument specifically for batterers intervention;
- (7) drug and alcohol use/abuse history and screening;
- (8) mental health history and screening;
- (9) criminal history, including a report of the incident that generated the referral;
- (10) current or past history with Child Protective Services or Adult Protective Services. If currently involved with Child Protective Services, the assessment shall include a review of the Individualized Service Plan;
- (11) family and social history;
- (12) access to weapons;
- (13) history of animal abuse or cruelty;
- (14) history of sexual abuse victimization;
- (15) history of petitions for protective orders filed and disposition;
- (16) pertinent medical information, including substance abuse and incidence of traumatic brain injuries;
- (17) copies of the court documents, including but not limited to: relevant court documents in divorce cases, divorce decrees, petitions for protective orders, protective orders, any and all court orders ordering the client to complete a BIP;
- (18) copies of the Probable Cause Affidavit or police report and criminal information if applicable;
- (19) copies of the Department of Human Services Individual Service Plan, if applicable;
- (20) a report shall be written as outlined in 75:25-3-4.1 (4) through (6); and
- (21) initial victim and current partner (if different from the victim) notification shall be attempted as outlined in 75:25-3-4.2.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18 ; Amended at 38 Ok Reg 1698, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-3-4.1. Record Content

- (a) Client records shall contain, at a minimum, the following information:
 - (1) Intake information:
 - (A) assessment information;
 - (B) date of intake if different than date of assessment;
 - (C) emergency contact information (not the victim or abused partner);and
 - (D) current employer, if applicable.
 - (2) Service notes for each client shall be completed by staff or volunteer after individual contact and every weekly session which shall minimally include:
 - (A) The time, date, location and description of services provided;
 - (B) The signature of staff or volunteer providing the services; and

(C) A service note shall be completed by the staff or volunteer providing the service for each weekly group contact, and shall include:

- (i) personal responsibility and accountability;
- (ii) level of participation in services;
- (iii) change(s) in family, social, personal, legal or work environment(s);
- (iv) inference of use or increased use of drugs/alcohol;
- (v) whether or not facilitator observed sufficient indications of risk requiring notification of victim or others, and
- (vi) Referrals for supplemental services.

(D) Staff or volunteer service notes shall document the ongoing provision of educational components addressing the risk of battering and other violence as set forth in 75:25-3-1(b).

(3) An individualized written contract shall be completed upon acceptance into the program prior to the first (1st) group session; signed by the client; and shall include, but not be limited to:

(A) Notice that the client is joining an educational program, not a therapeutic program, and will not have the same level of confidentiality afforded by mental health services. The program will not assure confidentiality with respect to:

- (i) Judge, District Attorney or referring agency;
- (ii) Current partner;
- (iii) Past or current victim(s) and/or a representative designated by the victim to receive information on behalf of the victim;
- (iv) Parent(s) or guardians of any of the client's children;
- (v) Probation and parole;
- (vi) Law enforcement;
- (vii) Individuals toward whom there is a risk of imminent harm by the client;
- (viii) Coordinated Community Response Team;
- (ix) The domestic violence victim services program serving the area where the client lives or where the current or ex-partner lives, where guardians of the client's children live or with the domestic violence program where the client is currently residing;
- (x) Guardian Ad Litem; or
- (xi) The program will promise confidentiality with respect to: the general public, news media and anyone else not covered in the expectations set forth above

(B) Attendance policy, including the length of intervention, minimum number of sessions required and the maximum length of time for completion of the required sessions.

(C) The criteria for suspension and termination, including notice that involuntary termination from a program terminates any and all attendance credits accumulated.

(D) The program's rules.

(E) A written notice in bold type which specifies "Please be advised any reasonable knowledge or suspicion of illegal activities or bodily harm, or a threat of such, to the victim, her or his property, or to third persons, or any attempt, threat or gesture to commit suicide, or any belief that child abuse or neglect is present or has occurred, will be reported to the appropriate person(s) or authorities."

(F) A list of provider program expectations, such as participation, and that the client will be held accountable for all abusive and violent behavior or threats of harm or expressions of intent to do harm. This includes harm to current or past victims or partners. Such acts include but are not limited to child abduction, court actions for divorce or custody, underhanded economic maneuvers, substance use, and intentionally exposing the victim(s) or partner(s) to risk of sexually transmitted diseases.

(4) Reports. The program shall develop a written policy for coordinating and complying with required reports to the court, judge, probation officer, child welfare worker and/or district attorney. In the case of court-ordered or otherwise referred batterers, a written report to the court or referring agency shall be submitted within seven (7) business days of the following events:

(A) Acceptance into the program including, but not limited to, a summary of the results of the initial assessment.

Rejection or denied admission to the program including, but not limited to, a summary of the results of the initial assessment, reason for rejection or denial, and any alternative service recommendations; and

(B) Reasonable knowledge or suspicion of illegal activities or bodily harm, abuse or a threat of such, to the victim, children or to third persons; and

(C) Exit from the program including, but not limited to, the service termination report which shall summarize the type of termination and reason for termination.

(i) **Rejection.** Reasons for rejection shall be documented and include, but are not limited to: psychiatric history, including active or recent mental health related problems; criminal record of violent crimes; chemical dependency requiring completion of an inpatient or residential treatment program; inability to function in a group due to limited mental cognitive abilities; or needs that do not match services provided by this program;

(ii) **Involuntary termination.** Reasons for involuntary termination shall be documented and include, but are not limited to: recurrence of

violence; arrest; absences from program sessions and activities; failure to actively participate in group sessions attended; attending a group session when under the influence of alcohol or drugs; violation of any rules of the program or violation of the BIP contract. Termination from a program terminates any and all credits accumulated by said batterer.

(iii) **Completion.** Upon completion of the program, an exit interview and service termination report shall be completed and documented in the client record. It shall be documented that the client participated in planning for the client's exit from the program. The client and staff shall sign and date acknowledgment of this service or an explanation shall be documented if staff is unable to obtain the client's signature. The service termination report shall include a disclosure stating that completion of the batterer's intervention program does not indicate that the client will not re-offend; it is a report that the person has completed the necessary requirements of the certified program without any other known or reported re-offending during the time of enrollment in the program.

(5) All reports shall include specific lethality risk indicators that the court may want to seriously consider and any concerns for the safety of victims, children and/or others.

(6) All reports shall include any perceived areas of concern which may include, but are not limited to, substance abuse or mental health issues.

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

(8) Compliance with this 75:25-3-4 shall be determined by a review of client records for content, review of program policy and procedures, or other supporting program documentation.

[Source: Added at 35 Ok Reg 871, eff 9-14-18 ; Amended at 38 Ok Reg 1698, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-3-4.2. Victim safety and confidentiality

(a) **Victim Safety.** Whereas confidentiality is a fundamental underpinning of services for victims of domestic violence, limited confidentiality is critical in batterer's intervention services. Victim safety shall supersede all consideration of client confidentiality for court referred and non-court referred clients.

(b) There shall be a written, cooperative, accountable working relationship between the batterers intervention program and the local OAG certified DVSA victim service provider(s) so potential victims and others are warned of imminent danger.

(c) Initial victim and current partner (if different from the victim) notification shall be attempted via telephone when the client has been accepted or denied admission to the program. Efforts to locate and notify the victim, current partner or the victim's advocate shall be attempted at least three (3) times within 7 business days of acceptance or rejection to the program. Upon making contact with the victim and current partner, the victim and current partner shall be informed of OAG certified victim services, notified of the assessment results, reason for rejection if applicable, perceived areas of concern which may include, but are not limited to substance abuse and/or mental health concerns, and specific lethality risk indicators. Efforts shall be documented in a separate file, which may include an electronic file. All victim and partner information shall be confidential and shall not be disclosed to the client or documented in the client's file.

(d) After the initial victim and current partner notification, the batterer's intervention program shall maintain contact with the victim or partner at the victim or partner's discretion. If the victim or partner elects not to receive and/or provide information, the program is still required to notify the individual in the case of imminent threat or danger to the victim or partner's safety, or that of any other persons.

(e) If the victim and partner (if different than the victim) elects to receive information after initial notification by the program, at a minimum, notification is required when:

- (1) the client begins attending the intervention program;
- (2) the client terminates the intervention program for completion or other reasons, such as noncompliance; and
- (3) there is an imminent threat or danger to the safety of persons or animals.

(f) The efforts to locate and notify the victim and current partner (if different than the victim) shall be documented.

(g) Compliance with 75:25-3-4.2 shall be determined by a review of program policy and procedures; client records; service agreements; and /or other program documentation.

[Source: Added at 35 Ok Reg 871, eff 9-14-18 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-3-5. Physical safety and integrity of client records

(a) Client records shall be maintained in a 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 75:25-3-5 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-6. 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 BIP records.
- (b) Client records shall not be maintained and/or stored at a location other than the certified locations without the prior written authorization of the Office of the Attorney General.
- (c) Client records shall be easily retrieved by staff as needed for providing and documenting services.
- (d) Compliance with 75:25-3-6 shall be determined by a review of the program's policy and procedures, and a review of office and files.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 36 Ok Reg 1388, eff 9-13-19]

75:25-3-7. Fire and safety codes and inspections

- (a) The physical environments of 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 75:25-3-7 shall be determined by a review of the annual fire and safety inspection report.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-8. Fire fighting and first aid equipment

- (a) All facilities shall have a first aid supply kit and annually maintained fire extinguishers.
- (b) Compliance with 75:25-3-8 shall be determined by on-site observation and by interviewing staff.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-9. 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 75:25-3-9 shall be determined by on-site observation, a review of written procedures, staff interviews, and documentation of drills.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-10. Persons with special needs

- (a) The program shall ensure that persons with disabilities are not excluded from services. Referrals must be provided when necessary, and the program shall have written procedures referrals for disabled persons who can not be served on-site. (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 75:25-3-10 shall be determined by a review of program policy and procedures.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-11. Program environment

(a) The certified 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 65°F and 85°F.
- (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) Smoking shall not be allowed in any indoor portion of any program.
- (8) Facility sanitation shall be maintained to prevent offensive odors and insect infestation.
- (9) All facilities shall have emergency back up lighting.

(b) Compliance with 75:25-3-11 shall be determined by a review of program policy and procedures; staff interviews, and on-site observation.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-12. Program management, policy and procedures

(a) The agency shall maintain written policy and procedures which describe the rules clients are expected to follow.

(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 75:25-3-12 shall be determined by a review of the program's written policy and procedures and a review of client records.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-3-13. Annual program evaluation

(a) On or before December 31 each year, the agency shall submit an annual outcomes-based evaluation of the program's services, facilities

and policy and procedures, covering the period between July 1 - June 30. This evaluation shall be carried out according to a written plan established in policy and procedures to include the plan of evaluation, quantitative data to be reviewed, and the persons to conduct the evaluation. The evaluation shall include, but not be limited to:

- (1) Outcomes management specific to each program component which minimally measures:
 - (A) efficiency;
 - (B) effectiveness; and
 - (C) client satisfaction.
 - (2) A quarterly quality batterer record review to evaluate and ensure, at a minimum:
 - (A) batterers are provided an individualized written contract;
 - (B) assessments are thorough, timely and complete; and
 - (C) service notes are documented as prescribed by standards.
 - (3) A review of critical incidents and client grievances and complaints.
- (b) Upon completion, this evaluation shall be made available to the OAG, local district attorney, court, personnel and volunteers.
- (c) Compliance with 75:25-3-13 shall be determined by a review of the program evaluation, policy and procedures, staff meeting minutes, and/or any other supporting documentation provided by the program.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 36 Ok Reg 1388, eff 9-13-19 ; Amended at 38 Ok Reg 1698, eff 9-11-21]

75:25-3-13.1. Statistical reports

- (a) The agency shall maintain quarterly statistical reports on a form designated by the OAG, which shall be submitted annually along with the agency's annual program evaluation.
- (b) Statistical reports shall include at a minimum screened, admitted, rejected, terminated, and completed clients, source of referral, and demographic information. Additional data may be requested by the OAG and shall be identified on the designated form.

[Source: Added at 38 Ok Reg 1698, eff 9-11-21]

75:25-3-14. 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 name, 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 Executive Director or authorized designee.

(c) Critical incidents that shall be reported to the OAG 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 including electronic 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 including electronic mail to the Office of the Attorney General Victims Services Unit.

(d) Compliance with 75:25-3-14 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 35 Ok Reg 871, eff 9-14-18]

75:25-3-15. Client rights

(a) Each client shall be afforded 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 receive services without regard to his or her race, sex, color, age, national origin, genetic information, religion, disability, or legal status.
- (3) 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.
- (4) 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.

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

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

(d) Compliance with 75:25-3-15 shall be determined by review of client files and client areas of the program.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 38 Ok Reg 1698, eff 9-11-21]

75:25-3-16. 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;

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

(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 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.

(b) Compliance with 75-3-16 shall be determined by review of client files.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14]

SUBCHAPTER 5. PERSONNEL AND VOLUNTEERS

PART 1. PERSONNEL

75:25-5-1. 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. Prior to employment, all certified programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of employees to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all certified programs are required to conduct a name search of employees against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act.

(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 75:25-5-1 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 36 Ok Reg 1388, eff 9-13-19]

75:25-5-2. 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 75:25-5-2 shall be determined by a review of the program's written policy and procedure, and staff interviews.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-5-3. 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;
- (2) Written criteria demonstrably related to the position being filled; and
- (3) Completion of a name search against the Mary Rippy and Violence Crime Offender registries. Said searches shall be conducted annually for program personnel and volunteers. Documentation of the same shall be maintained in each personnel or volunteer record.

(b) The BIP shall have a written policy that prohibits anyone with a prior history of domestic violence perpetration from conducting assessments and/or leading any group.

(c) Compliance with 75:25-5-3 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18]

75:25-5-4. 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 75:25-5-4 shall be determined by:
 - (1) a review of the program's policies and procedures, and
 - (2) a review of the program's job descriptions.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-5-5. 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 75:25-5-5 shall be determined by a review of personnel records.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-5-6. Supervision of personnel

- (a) A certified program shall establish in writing lines of supervision for all personnel.
- (b) Compliance with 75:25-5-6 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-5-7. 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 for all staff working in the BIP;
 - (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; and
 - (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 75:25-5-7 shall be determined by a review of:
- (1) program policies and procedures, governing authority meeting minutes where applicable; and
 - (2) review of personnel files.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 33 Ok Reg 1219, eff 9-11-16]

PART 3. VOLUNTEERS

75:25-5-12. 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. Prior to direct services volunteering, all certified programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of volunteers to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all certified programs are required to conduct a name search of direct services volunteers against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act.
- (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 75:25-5-12 shall be determined by a review of the program's written policy and procedure, and volunteer interviews.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 36 Ok Reg 1388, eff 9-13-19]

75:25-5-13. 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 75:25-5-13 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

75:25-5-14. 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 75:25-5-14 shall be determined by a review of personnel records.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10]

PART 5. TRAINING

75:25-5-19. Orientation - general, personnel and volunteers

(a) A certified program shall provide a minimum of 8 hours orientation training to familiarize new personnel and volunteers providing direct services with the BIP which includes, but is not limited to:

- (1) standards for the BIP;
- (2) program policy and procedures;
- (3) confidentiality, in relation to the BIP;
- (4) facility safety and disaster plans;
- (5) first aid kits and fire extinguishers, their location, contents and use;
- (6) universal precautions; and
- (7) client rights;

(b) 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.

(c) Compliance with 75:25-5-19 shall be determined by a review of the written policies and procedures, and personnel and volunteer training manuals and records.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 33 Ok Reg 1219, eff 9-11-16]

75:25-5-20. In-service and ongoing training for personnel and volunteers

(a) A certified program shall have policy and procedures mandating, at the minimum, twelve (12) hours of annual training of all staff which shall include:

- (1) confidentiality;
- (2) facility safety and disaster plans;

- (3) first aid kits and fire extinguishers, their location, contents and use;
 - (4) universal precautions, and
 - (5) legal and ethical issues.
- (b) The remaining hours of annual training shall be related to domestic violence, sexual assault, stalking, and batterers intervention as prescribed and approved by the Executive Director as appropriate for the assigned staff duties.
- (c) 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.
- (d) Individuals that volunteer indirect services and do not meet the requirements for a volunteer providing direct services as defined in OAC 75:25-1-3 shall receive annual training as prescribed by the Executive Director, but do not have a minimum number of training hours required.
- (e) 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.
- (f) All staff and volunteers shall, within six (6) months of enactment, complete training on amended standards in 75:25-5-21.
- (g) Compliance with 75:25-5-20 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 33 Ok Reg 1219, eff 9-11-16 ; Amended at 35 Ok Reg 871, eff 9-14-18]

75:25-5-21. Personnel training, batterers intervention services

- (a) Personnel facilitating batterers intervention groups shall minimally have a graduate degree in a behavioral health or criminal justice related field and one-year related work experience, have a Bachelor's degree in a behavioral health or criminal justice related field and two years related work experience, or have been employed as a facilitator in a certified batterers intervention program prior to July 1, 2008.
- (b) A certified batterers intervention program shall contract with or employ a qualified licensed professional as defined in 75:25-1-3 under "Counseling" for purposes of providing case consultation to personnel facilitating batterers intervention groups for client mental health and substance abuse issues. All BIP staff, BIP volunteers, BIP contractors, and BIP program supervisors shall complete batterers intervention facilitator orientation training sponsored by the Oklahoma Office of the Attorney General within six months of employment or volunteer service.
- (c) Prior to providing any direct services, personnel facilitating batterers intervention services shall observe a minimum of 12 batterers intervention group sessions from an OAG certified program, and must complete 20 hours of training that includes, but is not limited to:
- (1) causes and dynamics of domestic violence;

- (2) identification of cultural and social influences that contribute to violence;
- (3) identification of coercive behavior;
- (4) coercive sexual behavior;
- (5) impact of domestic violence on children and the dynamics of the batterer as a parent;
- (6) basic defense mechanisms of batterers that promote deception, distortion and misrepresentation of the facts of the domestic abuse and the experience of the victim; and
- (7) Lethality indicators and assessment procedures such as:
 - (A) perceived loss of control over the victim through separation, divorce, victim fleeing,
 - (B) extreme jealousy,
 - (C) escalation of abuse,
 - (D) acts of abuse,
 - (E) suicide/homicide threats, plan to carry out either of above,
 - (F) use of, or threat to use weapon (especially a gun),
 - (G) strangulation,
 - (H) stalking,
 - (I) history of mental health problems, substance abuse,
 - (J) history of sexual abuse of victim or children,
 - (K) kidnapping of partner,
 - (L) unemployment; and
 - (M) abuse or cruelty to animals
- (8) the effects of alcohol and drug use/abuse and domestic violence;
- (9) exploring myths and beliefs about domestic violence, including myths about provocation;
- (10) impact of domestic violence on victims;
- (11) batterers who re-offend;
- (12) group dynamics and group structure;
- (13) planning for non-violence and victim and dependent safety;
- (14) power and control;
- (15) facilitator boundaries and collusion with the client;
- (16) providing safe victim and/or partner contact; and
- (d) Personnel who provide batterers intervention service may not provide services for the victim that may result in a conflict of interest.
- (e) Personnel who provide batterers intervention must declare in writing that they are:
 - (1) violence free in their own lives,
 - (2) not abusing drugs or alcohol, and
 - (3) seeking to rid themselves of sexist attitudes.
- (f) Compliance with 75:25-3-21 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.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 28 Ok Reg 1923, eff 7-11-11 ; Amended at 29 Ok Reg 1770, eff 8-11-12 ; Amended at 31 Ok Reg 816, eff 9-12-14 ; Amended at 33 Ok Reg 1219, eff

SUBCHAPTER 7. CONSULTATION

75:25-7-1. Consultation and Coordination

(a) All Batterers Intervention Programs shall participate on the local Coordinated Community Response Team (CCRT), if one exists, for each city or county in which they are certified to operate. If a CCRT does not exist in the city or county in which they are certified to operate, the program shall demonstrate monthly consultation with a domestic violence advocate(s) from the Certified Domestic Violence and Sexual Assault Victim Service Program that provides services in the city or county in which the batterer's intervention program is certified to operate.

(b) Compliance with 75:25-7-1 shall be determined by documentation of meeting notes or minutes that shall include, but are not limited to, recording of:

- (1) the date, time and place of the meeting;
- (2) names of those attending, and
- (3) topics and issues discussed and decisions reached.

[Source: Added at 27 Ok Reg 1723, eff 7-1-10 ; Amended at 35 Ok Reg 871, eff 9-14-18]

SUBCHAPTER 9. TECHNOLOGY

75:25-9-1. Technology and system plan

(a) The agency shall have a written plan regarding the use of technology to support and advance effective and efficient service and business practices. The plan shall include, but not be limited to:

- (1) Hardware and software.
- (2) Security.
- (3) Confidentiality.
- (4) Backup policies.
- (5) Assistive technology.
- (6) Disaster recovery preparedness.
- (7) Virus protection.

(b) Compliance with this section shall be determined by a review of the facility policies, performance improvement plans and technology system plan.

[Source: Added at 38 Ok Reg 1698, eff 9-11-21 ; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 11. CODE OF PROFESSIONAL ETHICS

75:25-11-1. Applicability

This section is applicable to batterers intervention programs certified by the OAG pursuant to 74 O.S.2021, §§ 18p-1-18p-10.

[Source: Added at 42 Ok Reg, Number 20, effective 7-11-25]

75:25-11-2. Code of Professional Ethics

(a) Employees and volunteers of Attorney General certified batterers intervention programs pursuant to 74 O.S. § 18p-1 et seq. have an ethical obligation to victims, their clients, their community, and their profession.

(b) Each program shall have a written Code of Professional Ethics that includes behavioral expectations and underlying philosophy set forth in subchapter 1, section 2.1 of this chapter, providing for ethical standards including, but not limited to, the following ethical standards:

(1) Victim Safety, including collaborating and consulting with domestic violence victim advocates.

(2) Confidentiality and Privacy, including legal and ethical obligations to clients with respect to internal and external entities, and safe and responsible victim contact;

(3) Guiding Values, including engaging in a coordinated community response, integrity, non-judgment, respect for people's rights and dignity;

(4) Professional Competence, including knowledge, skills, experience, evidence-based and trauma-informed practices, cultural responsiveness, ongoing education, scope of competence, and duty to report the unethical conduct of colleagues to supervisors;

(5) Professional-Client Relationships, including boundaries, avoiding collusion with clients and system partners, dual relationships, and conflicts of interest; and

(6) Social Responsibility, including non-discrimination, and fostering anti-oppressive, equitable, inclusive, safe, trauma responsive, non-violent environments.

(c) Compliance with 75:25-10-2 shall be determined by a review of the written program policies and procedures, personnel files, training records, and/or other program documentation.

[Source: Added at 42 Ok Reg, Number 20, effective 7-11-25]

CHAPTER 30. STANDARDS AND CRITERIA FOR ADULT VICTIMS OF HUMAN SEX TRAFFICKING PROGRAMS

[Authority: 74 O.S., § 18p-6]

[Source: Codified 7-11-11]

SUBCHAPTER 1. GENERAL PROVISIONS

75:30-1-1. Purpose

This chapter sets forth the rules, including standards and criteria, used in certifying programs and shelters for adult victims/survivors of human sex trafficking pursuant to 74 O.S. § 18p-6. Human sex trafficking occurs when:

- (1) Recruiting, enticing, harboring, maintaining, transporting, providing or obtaining, by any means, another person through deception, force, fraud, threat or coercion for purposes of engaging the person in a commercial sex act,
- (2) Recruiting, enticing, harboring, maintaining, transporting, providing, purchasing or obtaining, by any means, a minor in a commercial sex act, or
- (3) Benefiting, financially or by receiving anything of value, from participating in a venture that has engaged in an act of trafficking for commercial sex.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-1-1.1. Application of Chapter 30 to Minors

Under state and federal law, the use of minors for commercial sexual activity is a severe form of trafficking, even if there is no force, fraud or coercion. Minors are intended to be served under a different program. However, minors may still need immediate medical care, housing, food, clothing and other services to assure safety until they can be transferred. These standards serve as guidance in understanding, providing and advocating for the needs of victims of human sex trafficking. The rules regarding factors relating to the process to determine status as a certified program including, but not necessarily limited to, applications, fees, requirements for and administrative sanctions, are found in OAC Title 75, Chapter 1.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-1-1.2. Mission and underlying philosophy

(a) The mission of the standards and criteria for programs serving adult victims of human sex trafficking is to eliminate the crime in the State of Oklahoma.

(b) The philosophy underlying the standards and criteria for victims of human sex trafficking is that:

- (1) All persons have the right to live without fear, abuse, oppression and violence;
- (2) No one deserves to be victimized by assaultive or abusive behavior;
- (3) Survivors should be treated with dignity and respect;
- (4) All people involved in violent crimes are affected, including victims, children, families, partners, friends, the community, and perpetrators;
- (5) Perpetrators must be held accountable for their behavior;
- (6) A coordinated community response is the best approach to eliminating human sex trafficking in Oklahoma;
- (7) Safety for the victims/survivors and their dependents is the primary focus of intervention and services;
- (8) Intervention and services shall be based upon the safety and well-being of individuals and communities. Services to victims are provided in a non-judgmental, non-coercive, trauma-informed environment; and
- (9) Participation in victim/survivor services is voluntary and based on self-determined needs, preferences and values.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-1-2. 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 and their dependents with the appropriate service components to encourage self-determination, autonomy, physical and emotional safety, and to offer information that will support independence. This can be viewed as a combination of active listening and facilitating personal problem solving along with researching options of action, safety planning, community outreach and education; it may include medical, dental, financial, employment, legal and housing assistance.

"Advocate" means a person, who offers clients appropriate services.

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

"Behavioral Health Professional" means 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, human sex trafficking or stalking and their dependents.

"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 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 a professional practice in which the service recipient is a partner, to the greatest extent possible, in assessing needs, defining desired outcomes, obtaining services, treatments, and supports, and in preventing and managing crisis. Case management is a central service that includes: explanation of social services, service system advocacy, basic case coordination, assessments, and service plan development. It may also include transportation, translation, emotional support and counseling depending upon the training and resources of the case manager.

"Case manager" means someone with experience serving victims of crime, human sex trafficking victims, refugees, immigrants, crime victims or other related populations. Ideally, they will have received specific training to serve trafficking victims. The Case Manager will ensure that victims receive the services they need and facilitate access to community services.

"Certification" means a process that the Department of Health and Human Services, Office of Refugee Resettlement (HHS or ORR) uses to officially say that a person is a victim of a severe form of human sex trafficking. Advocates assisting victims of human sex trafficking can assist in the certification process by informing victims of their rights generally, and working with law enforcement and attorneys to ensure that they understand and advocate for the victim's individual needs once certified.

"Certified adult victims of human sex trafficking program" means a status which is granted to an entity by the Oklahoma Attorney General, and indicates approval to offer program facilities and/or 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 unmarried 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 human sex trafficking, sexual assault/abuse and trauma on children i.e. 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 human sex trafficking, sexual assault/abuse and trauma on children including but not limited to intake, needs assessment, groups, advocacy and any other service related to human sex trafficking, sexual assault/abuse and trauma.

"Client" means an adult individual who has applied for, is receiving or has received assistance or services of a certified sexual assault program for adult victims of human sex trafficking.

"Client record" includes, but is not limited to, all communication, records and information on an individual client.

"Coercion" means compelling, forcing, or intimidating a person to act by:

- (A) Threats of harm or physical restraining against any person
- (B) Any act, scheme, plan, or pattern intended to cause a person to believe that performing or failing to perform, an act would result in serious physical, financial, or emotional harm or distress to or physical restraint against any person,
- (C) The abuse or threatened abuse of the law or legal process,
- (D) Knowingly destroying, concealing, removing, confiscating or possessing any actual or purported passport, labor or immigration document, including but not limited to a driver license or birth certificate, of another person.
- (E) Facilitating or controlling a person's access to any addictive or controlled substance other than for legal medical purposes
- (F) Blackmail,
- (G) Demanding or claiming money, goods, or any other thing of value from or on behalf of a prostituted person where such demand or claim arises from or is directly related to the act of prostitution
- (H) Determining, dictating or setting the times at which another person will be available to engage in an act of prostitution with a third party
- (I) Determining, dictating, or setting the places at which another person will be available for solicitation of, or to engage in prostitution with a third party
- (J) Determining, dictating or setting the places at which another person will reside for purposes of making such person available to engage in an act of prostitution with a third party.

"Commercial sex" means any form of commercial sexual activity such as sexually explicit performances, prostitution, participation in the production of pornography, performance in a strip club, or exotic dancing or display.

"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.

"Court advocate" means a qualified, trained staff or volunteer whose duties are to offer assistance to victims and any dependents in legal matters relevant to their situation. A Court Advocate provides court advocacy through support, information, assistance, safety planning, accompaniment and intervention with any aspect of the civil or criminal legal system on behalf of a victim of human sex trafficking. Court Advocates shall not act as licensed attorneys and are not permitted to

give legal advice, unless such person is a licensed attorney in the state of Oklahoma.

"Counseling" means face-to-face or virtual therapeutic session with one-on-one interaction between a licensed behavioral health professional and an individual to promote emotional and/or behavioral change focused on victim safety and perpetrator accountability. Those individuals providing professional therapy to adult/child victims/survivors of human sex trafficking as a result of sexual violence understand that victims of trafficking may exhibit depression, post-traumatic stress disorder, memory problems, fear, suspicion, rape trauma syndrome and physical distress as a result of the psychological stress, such as headaches, stomach aches, chest pain and numbing of parts of the body. Interviews requiring them to recount their experiences can trigger these behaviors. Initially, many victims may be more comfortable with less formal, supportive counseling or "conversations" (not counseling) geared toward immediate problem solving, adjusting to life at the center and coping with loneliness and isolation from their communities.

"Crisis intervention" means short-term, immediate assistance and advocacy given by phone, virtually, or in person to adult victims of human sex trafficking. Crisis intervention services include but are not limited to assessing dangerousness, safety planning, information about available legal remedies, establishing rapport and communication, identifying major problems, exploring feelings and providing support, exploring possible alternatives, and/or formulating an action plan and follow-up measures.

"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.

"Cultural diversity" means the spectrum of differences that exists among groups of people with definable and unique cultural backgrounds.

"Danger assessment" or **"Threat assessment"** means, for the purposes of human trafficking, a tool to determine the level and immediacy of threat posed to a victim or at risk person who may be currently or threat in the future of being labor or sex trafficked. There is currently no single tool prescribed in Oklahoma for assessing danger or threat in regards to human trafficking specifically. Certified service providers in Oklahoma have leeway to determine the best tool to use specifically with the victim at the time of the assessment. The OAG or other governing body may, in the future, prescribe an assessment protocol specifically for human trafficking.

"Debt bondage" means the status or condition of a debtor arising from a pledge by the debtor of his or her personal services or of those of a person under his or her control as a security for debt if the value of those services as reasonably assesses is not applied toward the

liquidation of the debt or the length and nature of those services are not respectively limited and defined.

"Direct services" means services delivered by a qualified staff member or volunteer, in direct contact with a client including telephone or other electronic contact.

"Director" means the person hired by the governing authority to direct all the activities of the organization.

"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, services, and photographs.

"Education" means the dissemination of relevant information specifically focused on increasing the awareness of the community and the receptivity and sensitivity to human sex trafficking 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 human sex trafficking to a secured identified location at which emergency services or crisis services can be offered.

"Executive director" or **"Chief Executive Officer"** or **"CEO"** 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 certified adult victims of human sex trafficking program, or program facilities, in and of all geographical locations and administrative divisions.

"Group counseling" means a face-to-face or virtual therapeutic session with a group of adult/child victims/survivors to promote emotional or behavioral change. Those individuals providing professional therapy to victims/survivors of human sex trafficking must be prepared to provide education and information about:

- (A) Physical and emotional safety;
- (B) How perpetrators maintain control and dominance over their victims;
- (C) The need to hold perpetrators accountable for their actions; and
- (D) The recognition that individuals victimized are not responsible for a perpetrator's violent behavior, and the

role of society in perpetuating violence against women and the social change necessary to eliminate violence against women, including the elimination of discrimination based on race, color, gender, sexual orientation, age, disabilities, economic or educational status, religion or national origin.

"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 an interaction intended to discover what has happened, determine what the crisis is, assess dangerousness indicators, do safety planning, and/or establish the immediate needs of adult victims and any dependents of human sex trafficking to determine appropriate services and referrals. This includes interaction with an individual determined to be appropriate for ongoing service in order to obtain basic demographic information, gather vital information on the adult and the children, orient the victim/survivor to the program, program rules, and, if applicable, the facilities. Cultural needs should also be identified at this time.

"Language Interpretation" means activities that involve a client who is deaf or hearing impaired or has limited English proficiency requiring an interpreter for a staff member or volunteers to offer services.

"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 can only be provided or supervised by a licensed physician.

"Medication" means any drug that is legally in the possession of the client, his/her children, or a person seeking admittance to the program facilities or his/her children; this definition includes prescription medications and medications available for legal purchase without a prescription.

"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 Oklahoma 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 offered 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 and hard of hearing, 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 human sex trafficking or the consequences of the 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 governing authority, staff, volunteers, activities and planning process to determine whether program goals are met, staff, volunteers, 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 75:30-11-12.

"Release" or **"Waiver"** means consent that is informed, written and reasonably time-limited. The terms may be used interchangeably to mean the same thing. 'Release' implies that confidential information is released (despite confidentiality or privilege protection), and 'Waiver' implies waiving the right (to maintain privilege). If release of information is compelled by statutory or court mandate, the program shall make reasonable attempts to provide notice to victims affected by the disclosure of information and take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

"Referral" means information disseminated and/or coordinated access to agency and community services to meet victim's/survivor's and their dependents identified needs.

"Safety Planning" means the process of working with the 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 situation and should include the safety needs of dependents. In some cases, human sex trafficking victims may face danger from organized crime, and the levels of danger depend on a host of factors including how much a victim's testimony can harm

the perpetrators and how violent and extensive a human sex trafficking organization may be. Additional risks may include isolation due to inability to speak English and distrust of law enforcement and the criminal justice system and unfamiliarity with ways to seek help and safety.

"Screening" means the process of determining, preliminarily, the nature and extent of an individual's problem in order to establish the service needs. At a minimum, a screening shall include a brief personal history related to victimization, 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.

"Self Determination" means the right to make one's own choices.

"Service agreement" means a written agreement between two or more 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 offered or provided, and signature, including electronic signature of staff or volunteer offering or 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" means a range of behaviors, including but not limited to rape, attempted rape, sexual battery, human sex trafficking, sexual abuse of children, sodomy and sexual harassment.

"Sexual assault services" means personal advocacy and support services provided to adult victims of human sex trafficking in settings such as law enforcement, medical settings or program offices.

"Sex trafficking" also known as **"Human Trafficking for Commercial Sex"** means recruiting, enticing, harboring, maintaining, transporting, providing or obtaining, by any means, another person through deception, force, fraud, threat or coercion for purposes of engaging the person in a commercial sex act, or benefiting, financially or by receiving anything of value, from participating in a venture that has engaged in an act of human sex trafficking for commercial sex.

"Residential Program services" means a certified residential living arrangement in a secure setting with support and advocacy services provided by qualified staff, for adult victims of sexual assault as a result of human sex trafficking and their dependents.

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

"Substance Abuse Services" means the assessment and treatment of diagnosable substance abuse and dependence disorders, as defined by current DSM criteria, by qualified alcohol and drug treatment professionals.

"Support" or **"Supportive Services"** means the provision of direct services to victims and their dependents for the purposes of preventing

further violence, helping such victims to gain access to civil and criminal courts and other community services, facilitating the efforts of such victims to make decisions concerning their lives in the interest of safety, and assisting such victims in healing from the effects of human sex trafficking.

"Transitional living services" means temporary, independent living programs with support services provided by the staff or volunteers of the sponsoring human sex trafficking program. These services are extensions of human sex trafficking shelter services to victims of human sex trafficking and their dependents. These services permit victims to develop their financial capacity and other means to live independently.

"Trauma-informed services" means a service approach that recognizes the impact of trauma and acknowledges the role of trauma in the lives of victims/survivors and their dependents.

"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.

"Voluntary Services" means a program shall not mandate participation in supportive services as a condition of program facility residency or emergency services (Family Violence Prevention and Services Act (42 U.S.C. 10408)

"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.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-1-3. 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; and
- (3) **"May"** is the term used to reflect an acceptable method that is recognized but not necessarily preferred.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-1-4. Annual review of standards and criteria

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

[Source: Added at 28 Ok Reg 1931, eff 7-11-11]

SUBCHAPTER 3. PROGRAMS FOR ADULT VICTIMS/ SURVIVORS OF HUMAN SEX TRAFFICKING

75:30-3-1. Service programs core services

- (a) Programs serving victims of sexual violence as a result of human sex trafficking and their dependents or family members should consider special service needs when developing a plan to offer services.
- (b) All certified programs shall provide safe, accessible, and trauma-informed services for victims of human sex trafficking and their dependents or non-offending family members.
- (c) The program shall develop a philosophy of trauma-informed service provision based upon voluntary services and individual self-determination. The written statement of the philosophy of services shall be approved by the governing authority and made available to the community, staff, volunteers and clients.
- (d) The program shall have policies and protocols for accepting victims of human sex trafficking and develop procedures to maintain facilities, staffing, and operational methods, including a policy on the recruitment of board members, staff and volunteers who are representative of the diversity in the local community and the diversity of their clients.
- (e) All certified programs shall ensure program facilities or temporary emergency housing is provided and be able to respond to special needs which may include:
 - (1) Length of stay shall be based on the needs of the client.
 - (2) Safety planning should be designed to meet individual, unique needs. Safety planning can be complex due to danger created by an extensive human sex trafficking organization. Perpetrators often threaten the trafficked person's family in the country of origin as well, and such threats impact decisions made by a human sex trafficking victims.
 - (3) Human sex trafficking victims may never have assimilated into the local community or U.S. culture. Such lack of assimilation, in addition to language barriers and lack of family or community support may make it difficult to meet program facility requirements such as communal meals, support groups and roommates of different ethnic, cultural or religious backgrounds.
 - (4) Human sex trafficking victims may have language interpretation needs. The program shall provide access to an interpreter. It may be necessary for the program to provide translations of written consent forms and other documents.
 - (5) Human sex trafficking victims may need intensive case management and advocacy for extended periods of time.
 - (6) In trafficking situation, victims of human sex trafficking are often compelled to provide their services without any compensation. Programs should be cognizant of this dynamic, especially as it relates to the assignment of chores.
 - (7) Programs should ensure victims are educated about the value of participating in the legal prosecution of offenders and that an

appropriate release or waiver may be necessary. It is the human sex trafficking victim's choice to cooperate with law enforcement. Programs may have to educate law enforcement about certain policies, confidentiality and privilege laws, victim issues, including safety concerns, and whether or not law enforcement may enter the shelter. Programs shall also inform law enforcement that victims cannot be restricted from leaving the program facility. An organization's cooperation with law enforcement for the purpose of identification and prosecution of known traffickers is permissible as long as the victim's identification does not have to be revealed without their consent if the trafficker is retaliating against the victim or is otherwise putting the program, program staff, the victim, or other program participants in danger. Programs shall provide alternate, secure locations for interviews.

(8) Victims of human sex trafficking may often have complex legal needs and be charged with federal or state crimes. Programs should develop relationships with qualified criminal defense and civil attorneys, including the federal and state public defender offices that can assist them.

(9) Establishing networks with additional service providers: Because of the unique needs of human sex trafficking victims, programs may have to identify and establish relationships with service providers such as those who do refugee settlement, with whom they have no previous relationship, and assess the providers as potential referral sources.

(f) All certified programs shall provide services free from all forms of unlawful discrimination based on race, sex, color, age, national origin, genetic information, religion, disability (i.e., physical, mental illness and substance abuse), and/or economic or educational status, including a policy that services to will not be denied or diminished on the basis of immigration status.

(g) Compliance with 75:30-3-1 shall be determined by a review of the program's policies and procedures, service agreements, on-site observation, client and staff interviews and/or other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 38 Ok Reg 1701, eff 9-11-21 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-3-1.1. Crisis intervention services

(a) All certified human sex trafficking programs shall offer crisis intervention services including, but not limited to:

(1) Twenty-four (24) hour crisis telephone services either operated solely by the program or in collaboration with other certified programs, and shall be staffed by trained staff or volunteers, and provide 24-hour immediate, direct access to crisis advocates. Pagers, answering machines or answering services that do not offer immediate access to a crisis advocate shall not be sufficient to meet this requirement;

- (2) Provide access to services or providers who can conduct screenings for immediate needs including safety; medical including screening for tuberculosis, sexually transmitted diseases, HIV, Hepatitis B and Hepatitis C, vaccinations/immunizations, medical treatment for physical injuries, and dental care; mental health; substance abuse; and status including eligibility for other services and HHS or ORR certification;
- (3) Emergency housing such as hotel or motel available for victim and any dependent(s);
- (4) Arrangement for safe program facilities, food, clothing, and incidentals needed by victim and any dependent(s) as soon as practical;
- (5) Provide protection if the safety of the victim is at risk or if there is a danger of additional harm by recapture of the victim by a perpetrator, including: taking measures to protect human sex trafficking victims and their family members from intimidation and threats of reprisals and ensuring that the names and identifying information of human sex trafficking victims and their family members are not disclosed to the public;
- (6) The 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;
- (7) Assignment or referral to Case Manager or program equivalent, e.g., advocate, lead advocate, etc.;
- (8) Provision of advocacy and referral to assist the victims in obtaining needed services or resources;
- (9) Follow-up services shall be offered to all victims if victim safety is not compromised;
- (10) Crisis intervention or support services, case management or referral for case management, advocacy, and victim recovery services. These programs shall minimally either directly provide or make provision for the following services:
- (11) Life and job skills training;
- (12) Establishment of contact with families of victims if appropriate and desired by the client;
- (13) Advocacy services, both in person and by telephone or other electronic means, either in the locations of other community services and systems, or in the program's offices to assist with obtaining certification and public benefits;
- (14) A resource document of local, area, or state resources to facilitate referrals for clients for longer term counseling and housing and legal services, particularly time-sensitive legal assistance from an attorney;
- (15) The agency shall maintain an updated list of identified behavioral health professionals in the community who treat clients with trauma related to human sex trafficking as well as victims who need additional mental health or substance abuse services; and

- (16) Provide referral to legal assistance, information about their rights and translation services as necessary.
- (b) Compliance with 75:30-3-1.1 shall be determined by a review of the program's policies and procedures, service agreements, on-site observation, client and staff interviews and/or other supporting documentation.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-3-1.2. Court advocacy services

- (a) All certified programs shall provide assistance to victims and their dependents in legal matters relevant to their situation. Court advocacy services include provision of information, support, assistance, safety planning, accompaniment and intervention with any aspect of the civil or criminal legal system on behalf of a victim of human sex trafficking. Court advocacy services must be provided by qualified, trained staff members or volunteers.
- (b) Advocacy services must both be in person or by telephone, either in the location of other community locations 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.
- (c) Compliance with 75:30-3-2.1 shall be determined by a review of policies and procedures, client files and personnel files.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-3-2. Program facilities

- (a) All program facilities shall comply with section 75:30-3-1. Each program facility shall provide long-term program facility services and staffing twenty-four (24) hours per day, seven (7) days per week and offer the following services:
- (1) Program facilities shall provide room, food, bathing and laundry facilities, necessary clothing and toiletries for victims and their children free of charge. Programs shall not ask clients to use their nutrition assistance benefits to supplement food for the facility;
 - (2) Program facilities 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) Programs shall offer screening, referral and linkage to clients and callers to appropriate community resources, to include assistance in making initial contact;
 - (4) Programs must ensure to the best of its ability the physical and emotional safety, security, and confidentiality of clients and the location of the shelter;
 - (5) The program shall establish and maintain involuntary exit criteria;
 - (6) The program's policy shall have written procedures regarding the supervision of children; and

- (7) The program shall offer services to clients with dependent boys over the age of twelve.
- (b) Compliance with 75:30-3-2 shall be determined by a review of policies and procedures, service agreements, on-site observation, and/or other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-3-3. Safe Home for adult victims of sex trafficking [REVOKED]

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Revoked at 31 Ok Reg 820, eff 9-12-14]

75:30-3-4. Transitional living program

- (a) All transitional living programs shall comply with 75:30-3-1, 75:30-3-1.1 and the following:
- (1) The program shall maintain homes, apartments, or other residential living environments suitable for survivors of human sex trafficking and their dependents, if applicable, and which provide the reasonable safety and privacy needed by this population. The program shall offer 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 or a volunteer as the advocate or liaison for the clients residing in the transitional living program(s). This person, or a crisis line staff person or volunteer, 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 their children; and
 - (7) The program shall offer at least one 30 minute face-to-face service contact per week with each transitional living residents and their children.
- (b) Compliance with 75:30-3-4 shall be determined by a review of program policies and procedures, client records, on-site observation, written agreements and/or other supporting documentation.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-3-5. Children's services

- (a) Client records for both residential and non-residential children shall contain, at a minimum, the following information:

- (1) Intake and screening information:
 - (A) Client's name;
 - (B) Date of initial contact/intake;
 - (C) Age;
 - (D) Pertinent medical information;
 - (E) Mother's name;
 - (F) Father's name; and
 - (G) Name of adult client's abuser.
- (2) Custody
 - (A) Has the court entered a custody order; If yes, what does the order provide?;
 - (B) With whom does the child physically reside?;
 - (C) Does the child have contact with the adult client's abuser?; and
 - (D) Is visitation court ordered with the abuser?
- (3) 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; and
 - (D) History of involvement in the child welfare system; including the presence of current child welfare involvement.
- (4) Service notes, which shall minimally include: the date, location, start time, duration and description of services provided delineated by time spent and service code, if applicable, or documentation of referral to other services or case management.
- (b) Within five (5) business days of entry into residential services (excluding advocacy or children's activities or crisis intervention), all certified programs shall offer to assess the risk and needs, including culturally specific needs, of the children accompanying primary victims and offer 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, when accepted, shall minimally include information on his or her:
 - (1) Brief trauma screening to assess the impact of trauma;
 - (2) Developmental history to include speech and language, hearing and visual;
 - (3) Medical or physical health history;
 - (4) Social history to include interactions with peers;
 - (5) History of use of tobacco, alcohol or other drugs;
 - (6) Parent/guardian custodial status; and
 - (7) Community referral needs.
- (c) Services provided to each child shall be culturally sensitive while addressing identified risks 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 educational needs;

- (6) Parenting support for clients, if applicable; and
- (7) Children's groups using age appropriate topics and based on established best practices.
- (d) Pursuant to 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.
- (e) Compliance with this 75:30-3-5 shall be determined by a review of client records, program policies and procedures, on-site observation, written agreements, and/or other program supporting documentation.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 35 Ok Reg 882, eff 9-14-18 ; Amended at 36 Ok Reg 1390, eff 9-13-19]

SUBCHAPTER 5. CLIENT RECORDS AND CONFIDENTIALITY

75:30-5-1. 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 victims of human sex trafficking.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-5-2. 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. No identifying information such as initials, age, year of birth or gender shall be part of the client ID.
- (b) A certified program shall have written policies 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 policies and procedures shall forbid the use of "white-out" or any action which obliterates the error.
- (c) Compliance with 75:30-5-2 shall be determined by on-site observation, client records and any other supporting program documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-5-3. Record content - general

- (a) Client records for both residential and non-residential clients 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, if applicable;
 - (E) History/nature of abuse including an evidence-based dangerousness assessment, if applicable and safety planning, screening for medical, mental health and substance abuse, status including eligibility for other services and HHS or ORR certification; and
 - (F) Perpetrator(s) 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, if applicable, or documentation of referral to other services or case management; and
 - (B) The signature of staff or volunteer providing the services or referral.
 - (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 or volunteer, 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 or volunteer 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 or volunteer making the entry.
 - (c) Compliance with 75:30-5-3 shall be determined by a review of program policies and procedures; review of the client records for content; and/or other supporting program documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 35 Ok Reg 882, eff 9-14-18]

75:30-5-3.1. Record content - service specific

- (a) Client records for specific services shall conform to the following:
 - (1) **Shelter Program Facility Services:**
 - (A) On a client's entry to the program facility, staff or volunteers shall record the client's name, emergency contact person(s), if applicable, known allergies, and any referrals 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 program facility. Assessing client's safety planning shall also be done at the time of the full intake;
 - (B) Program clients shall have the full intake interview and screening completed within fourteen (14) days of entry into the program facilities;

- (C) Service plans shall be offered within thirty (30) business days of client's entry to the program facilities and at the client's discretion;
- (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 the client and children; and
- (G) A daily note.

(2) Crisis Intervention Services:

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

- (i) Staff/Volunteer Name and signature;
- (ii) Date, time, length, and location of intervention;
- (iii) Safety Planning based on risk;
- (iv) Client's name, age, race, county of residence, and contact number if given;
- (v) Protective order information, if applicable;
- (vi) Personnel involved such as police, hospital, etc;
- (vii) Summary of contact including visible injuries, treatment and services requested; and
- (viii) Follow up services shall be offered to all victims, if victim safety is not compromised; and
- (ix) 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) Safety planning based on risk;
- (iv) 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 about human sex trafficking services;
- (v) Summary of the call including services needed; and
- (vi) Outcome.

(C) Contact information is kept by the program.

(D) Clients to be transported to program facilities shall be screened before the shelter referral is made. If the client is in immediate danger, no safe housing is available, or appropriate screenings are conducted by other parties which the certified program has approved to do screenings, this screening may be initially waived. If the screening is waived, documentation shall reflect the reason(s) and the notification of such to the program facility.

(3) Counseling, Support and Advocacy Services:

- (A) An assessment of the client's needs, including culturally specific 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; and
- (C) A service plan review and update shall be completed at a minimum of once every six (6) months.

(4) Transitional Living Services: A service plan including safety issues for the client and dependents shall be developed within five (5) business days of the client moving in.

- (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 75:30-5-3.1 shall be determined by a review of client records, policies and procedures, call logs, and/or other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 35 Ok Reg 882, eff 9-14-18 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-5-4. Client confidentiality

- (a) Protecting the confidentiality of human sex trafficking victims is critical to protecting their safety and establishing trust. Case or client records, files or notes, of a certified program for adult victims of human sex trafficking shall be confidential and shall only be released under certain prescribed conditions pursuant to Oklahoma law (74 O.S. § 18p-3).
- (b) The program shall have written policies and procedures to ensure confidentiality of client information and identity of the program's 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 and limitations with each client and maintain documentation in the client record that they have reviewed the circumstances under which confidential information may be revealed. Assisting human sex trafficking victims requires the release of confidential information more often, and to more organizations, than when assisting non-trafficked victims. This is particularly true if the victim is seeking certification from HHS or ORR. Staff or volunteers should always obtain the informed, written consent of the victim when relaying confidential information to any person, including law enforcement, federal prosecutors, state attorneys, victim advocates and social services agencies. The written consent forms must be translated into the victim's native language, state the name of the person or organization receiving the information, and contain an expiration date.
- (c) The human sex trafficking program must comply with both the state and federal laws that govern confidentiality and any exceptions to those laws.
 - (1) **State Law:** Case or client records, files or notes, of a human sex trafficking program shall be confidential and shall only be

released under certain prescribed conditions (74 O.S. § 18p-3):

(A) The case records, case files, case notes, client records, or similar records of a human sex trafficking program certified by the Attorney General or of any employee or trained volunteer of a program regarding an individual who is residing or has resided in such program or who has otherwise utilized or is utilizing the services of any human sex trafficking program or counselor shall be confidential and shall not be disclosed;

(B) For purposes of this subsection, the term "client records" shall include, but not be limited to, all communications, records, and information regarding clients of human sex trafficking programs; and

(C) The case records, case files, or case notes of programs specified in paragraph 1 of this subsection shall be confidential and shall not be disclosed except with the written consent of the individual, or in the case of the individual's death or disability, of the individual's personal representative or other person authorized to sue on the individual's behalf or by court order for good cause shown by the judge in camera.

(2) Federal Law:

(A) The Violence Against Women Act universal grant conditions regarding confidentiality, Section 3 of VAWA, 34 USC §12291(b)(2) provides, in part: In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees and subgrantees shall protect the confidentiality and privacy of persons receiving services. Grantees and subgrantees shall not: disclose, reveal, or release any personally identifying information or individual information collected in connection with services requested, utilized, or denied through grantee and subgrantee programs, regardless of whether the information has been encoded, encrypted, hashed or otherwise protected; or disclose, reveal, or release individual client information without the informed, written, reasonably time-limited consent of the person (or in the case of an unemancipated minor, the minor and the parent or guardian or in the case of legal incapacity, a court-appointed guardian) about whom information is sought, whether for this program or any other Federal, State, tribal, or territorial grant program, except that consent for release may not be given by the abuser of the minor, incapacitated person, or the abuser of the other parent of the minor. If a minor or a person with a legally appointed guardian is permitted by law to receive services without the parent's or guardian's consent, the minor or person with a guardian may release information without additional consent. If release of information is compelled by statutory or court mandate, grantees and subgrantees

shall make reasonable attempts to provide notice to victims affected by the disclosure of information and take steps necessary to protect the privacy and safety of the persons affected by the release of the information. In no circumstances may an adult, youth, or child victim of domestic violence, dating violence, sexual assault, or stalking be required to provide a consent to release identifying information as a condition of eligibility for the services provided.

(B) The Family Violence Prevention and Services Act universal grant conditions on confidentiality, 42 USC 10401 et seq. provides, in part: Personally identifying information. The term personally identifying information has the meaning given the term in the Violence Against Women Act. In order to ensure the safety of adult, youth, and child victims of family violence, domestic violence, or dating violence, and their families, grantees and subgrantees under this title shall protect the confidentiality and privacy of such victims and their families. Subgrantees shall not disclose any personally identifying information collected in connection with services requested (including services utilized or denied), through grantee and subgrantee programs; or reveal personally identifying information without informed, written, reasonably time-limited consent by the person about whom information is sought, whether for this program or any other Federal or State grant program, which consent shall be given by the person, except in the case of an unemancipated minor, the minor and the minor's parent or guardian; or in the case of an individual with a guardian, the individual's guardian; and may not be given by the abuser or suspected abuser of the minor or individual with a guardian, or the abuser or suspected abuser of the other parent of the minor. If release of information is compelled by statutory or court mandate grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the release of the information; and grantees and subgrantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(C) Victims of Crime Act regulations on confidentiality applying to grantees, 28 CFR §94.115 provides in part: Sub-recipients of VOCA funds shall, to the extent permitted by law, reasonably protect the confidentiality and privacy of persons receiving services under this program and shall not disclose, reveal, or release any personally identifying information or individual information collected in connection with VOCA-funded services requested, utilized, or denied, regardless of whether such information has been encoded, encrypted, hashed, or otherwise protected; or individual client

information, without the informed, written, reasonably time limited consent of the person about whom information is sought, except that consent for release may not be given by the abuser of a minor, incapacitated person, or the abuser of the other parent of the minor. If a minor or a person with a legally appointed guardian is permitted by law to receive services without a parent's (or the guardian's) consent, the minor or person with a guardian may consent to release of information without additional consent from the parent or guardian. If release of information is compelled by statutory or court mandate, SAAs or sub-recipients of VOCA funds shall make reasonable attempts to provide notice to victims affected by the disclosure of the information, and take reasonable steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) Housing Assistance Emergency Solutions Grants, at 42 U.S.C. § 11375 (c)(5), require recipients to develop and implement procedures to ensure confidentiality of records pertaining to any individual provided family violence prevention or treatment services under this part and that the address or location of the family violence program facilities project assisted under this part will not be made public without written authorization of the person or persons responsible for the operation of such program facilities; and

(E) Stewart B. McKinney Homeless Assistance Act, at 42 U.S.C. § 1130163, mandates that any victim service provider that is a recipient or subgrantee shall not disclose for purposes of the Homeless Management Information System (HMIS) any personally identifying information about any client. Subgrantees may be required to disclose for purposes of HMIS non-personally identifying information that has been de-identified, encrypted, or otherwise encoded. The Violence Against Women Act also contains a provision that specifies a domestic violence program provider shall not disclose any personally identifying information about any client to the Homeless Management Information System (HMIS).

(d) Compliance with 75:30-5-4 shall be determined by a review of the program's policies and procedures; and on-site observation of the handling and review of client records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 38 Ok Reg 1701, eff 9-11-21 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-5-4.1. Waiver of Confidential Information

(a) For a waiver of confidentiality to be valid, it must:

- (1) Be voluntary;
- (2) Relate only to the participant or the participant's dependents;

- (3) Clearly describe the scope and any limitations of the information to be released;
- (4) Include an expiration date;
- (5) Inform the participant that consent can be withdrawn at any time, orally or in writing;
- (6) Programs may only share the specific information the client allows in the release. The client gets to choose when, how and what personal information will be shared, or not shared, and with whom;
- (7) Even when a court mandate requires the program to disclose or release information about the client, the program may only share the minimum information necessary to meet the statutory or court mandate; and
- (8) The program/agency shall notify the victim of any disclosure and to continue taking steps to protect the victim's safety and privacy.

(b) A valid written release form for disclosure of client information shall have, at a minimum, the following elements:

- (1) The specific name or general designation of the program or person permitted to make the disclosure;
- (2) The name and title of the individual, agency or organization to which disclosure is to be made;
- (3) The name of the client whose records are to be released;
- (4) The purpose of the disclosure;
- (5) A description of the information to be disclosed;
- (6) The dated signature of the client or authorized representative or both when required;
- (7) A statement of the right of the client to revoke the release in writing and a description of how the client may do so; and
- (8) An expiration date, specified event or condition which, if not revoked before, shall ensure the release will last no longer than reasonably necessary to serve the purpose for which it is given. The reasonableness of this time period will depend on the specific situation.

(c) "In the event of my death" clause: Some programs have chosen to talk with clients about the lethality of human sex trafficking and ask if they would like the program to share information with police, prosecutors, the Oklahoma Fatality Review Board, or others the client may indicate in the event that the client dies (due or not due to ST). Because clients may have to sign multiple releases, programs shall have the "in the event of my death" exception on a different form.

(d) The program shall have written policies 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.

(e) Compliance with 75:30-5-4.1 shall be determined by a review of the program's policies and procedures; and on-site observation of the handling and review of client records.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 38 Ok Reg 1701, eff 9-11-21]

75:30-5-5. 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 75:30-5-5 shall be determined by a review of the program policies and procedures; on-site review of locking mechanisms and procedures to assure security; and on-site observation of the handling of client records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-5-6. Client record, handling, retention, and disposal

- (a) A program shall have written policies 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 not be maintained and/or stored at a location other than the certified locations without the prior written authorization of the Office of Attorney General.
- (c) Client records shall be easily retrieved by staff as needed for providing and documenting services.
- (d) Compliance with 75:30-5-6 shall be determined by a review of the program's policies and procedures, and a review of office and files.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19]

75:30-5-7. Residential Program Policy on Medications

- (a) The program shall seek to afford program residents with the greatest possible privacy and autonomy in regard to their medication, while also providing a safe shelter environment as follows:
- (1) Staff and volunteers will not dispense medication;
 - (2) The program will provide every resident with an individual locking box, locker, or locking cabinet ("locked space") for storage of medications and valuables or lock the clients' medication in a safe but accessible location;
 - (3) The program will not limit or monitor the survivor's access to her medication;
 - (4) If a client indicates that she needs access to refrigerated storage space, the program will provide refrigerated storage space in the manner that provides the greatest possible privacy and autonomy; and
 - (5) The program shall have a policy for the disposal of unused or abandoned medication or other substances.

(b) Safety Agreement: During a resident's stay at shelter, the client shall be asked to make sure that any medications the client has are safely secured.

(1) The program will ask every resident to sign an agreement that the client will store any medications in the client's individual locking box, locker, or locking cabinet provided, or if it is one requiring refrigeration, as otherwise provided. The agreement will provide that residents who have medications that must be taken in the event of a medical emergency may carry them on their person (e.g., in a fanny pack).

(c) Compliance with 75:30-5-7 shall be determined by a review of the program's policies and procedures, and on-site observation.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 7. PHYSICAL ENVIRONMENTS

75:30-7-1. Physical plant, primary role

(a) The primary role of programs is to provide safety; and they must also protect the confidentiality and privacy of victims of sexual violence as a result of human sex trafficking 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 and volunteers.

(b) Facilities that serve both victims of human sex trafficking as well as domestic violence victims in the same facility shall have written procedures to ensure that its services do not jeopardize the safety and psychological well-being of either victim.

(c) Compliance with 75:30-7-1 shall be determined by a review of program policies and procedures and a tour of the facility.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-7-2. Fire and safety codes and inspections

(a) The physical environments of program 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 75:30-7-2 shall be determined by a review of the annual fire and safety inspection report.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

Editor's Note: ¹*In the text of Section 75:30-7-2 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-4-2,*

which had been editorially renumbered to 75:30-7-2. The agency later corrected this cross reference in amendments that became effective 9-11-16.

75:30-7-3. Firefighting and first aid equipment

- (a) All facilities shall have a first aid supply kit and annually maintained fire extinguishers.
- (b) Compliance with 75:30-7-3 shall be determined by on-site observation and by interviewing staff.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-7-3 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-4-3, which had been editorially renumbered to 75:30-7-3. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-7-4. 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, staff or volunteer. 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 75:30-7-4 shall be determined by on-site observation, a review of written procedures, staff or volunteer interviews, and documentation of drills.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-7-5. Persons with special needs

- (a) Pursuant to the Americans with Disabilities Act of 1990, the program 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 offer equal opportunities for services. Referrals must be offered when necessary, and the program shall have written procedures for referrals of disabled persons who cannot 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 offered 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 75:30-7-5 shall be determined by a review of program policies and procedures.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-7-6. 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 65°F and 85°F;
- (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 backup lighting;
- (11) Telephones shall be provided for the convenience of the staff or volunteers, and the necessary accommodation of the clients. Pay telephones only are not acceptable;
- (12) There shall be written policies and procedures addressing the use of any outdoor recreational space, including required supervision and the safety of children;
- (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; and
- (15) The Poison Control Center's toll-free telephone number shall be posted and visible to staff, volunteers and clients at all times.

(b) Compliance with 75:30-7-6 shall be determined by a review of program policies and procedures, staff, volunteer and client interviews, and on-site observation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-7-7. Program environment, residential services programs

(a) All certified residential programs shall comply with section 75:30-7-6 and the following:

- (1) 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;
- (2) 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;
- (3) Provisions shall be made to assist or make food available for meal preparation that accommodates special diets;
- (4) The facility shall have, at minimum, a commode, lavatory, and bathing facility at a ratio of one (1) to twelve (12) resident, including infants and children. The privacy of individuals or families shall be assured while using these facilities;
- (5) 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;
- (6) There shall be written policies and procedures for laundry and linens, addressing frequency of changing linens, and laundry arrangements within the facility;
- (7) Laundry equipment shall be provided within the residential facility, and shall be kept clean, well-maintained, and properly ventilated;
- (8) Reasonable space shall be provided for storage of clients' personal belongings;
- (9) Written policies and procedures shall address secure storage of client valuables;
- (10) Written policies and procedures shall address the secure handling and storage of client medications, including policy to document client access to medication;
- (11) 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;
- (12) All outdoor openings such as windows shall be covered for privacy;
- (13) 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;
- (14) Safe and adequate internal play space for children, including outlet protectors and gated stairwells; and
- (15) Baby beds and high chairs that ensure children's safety and comfort shall be available for infants and small children.

(b) Compliance with 75:30-7-7 shall be determined by a review of program policies and procedures; program facility rules, staff, volunteer and client interviews where appropriate, and on-site observation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

**75:30-7-8. Program environment, Safe Home services program
[REVOKED]**

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Revoked at 31 Ok Reg 820, eff 9-12-14]

75:30-7-9. Program environment, transitional living services program

(a) All transitional living services programs shall comply with section 75:30-7-6 (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;
- (4) outdoor Outdoor openings such as windows shall be covered for privacy; and
- (5) the 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.

(b) Compliance with 75:30-7-9 shall be determined by a review of program policies and procedures, provider and client interviews where appropriate, and on-site observation.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

SUBCHAPTER 8. TECHNOLOGY

75:30-8-1. Technology and system plan

(a) The agency shall have a written plan regarding the use of technology to support and advance effective and efficient service and business practices. The plan shall include, but not be limited to:

- (1) Hardware and software.
- (2) Security.
- (3) Confidentiality.
- (4) Backup policies.
- (5) Assistive technology.
- (6) Disaster recovery preparedness.
- (7) Virus protection.

(b) Compliance with 75:30-8-1 shall be determined by a review of the facility policies, performance improvement plans and technology system plan.

[Source: Added at 38 Ok Reg 1701, eff 9-11-21]

SUBCHAPTER 9. PROGRAM MANAGEMENT AND PERFORMANCE IMPROVEMENT

75:30-9-1. 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 75:30-9-1 shall be determined by a review of written program policies and procedures.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-9-2. Program management, policies and procedures

- (a) The agency shall maintain written policies and procedures that describe each program service component, the rules clients are expected to follow for each component, and staff or volunteer duties. Policies shall include but are not limited to:
 - (1) Length of stay limitations, if any;
 - (2) Participation in housekeeping, food preparation or other activities, if applicable; and
 - (3) Physical punishment of children shall not be allowed.
- (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 75:30-9-2 shall be determined by a review of the program's written policies and procedures; rules; client interviews and record documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-9-3. 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 staff and volunteers.
- (c) Compliance with 75:30-9-3 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.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-9-3 that became effective on 7-11-11, subsection (c) contained a cross reference to Section 75:30-5-7, which had been editorially renumbered to 75:30-9-3. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-9-4. Annual program evaluation

- (a) On or before December 31 each year, the agency shall submit an annual evaluation of the program's services, facilities and policies and procedures, covering the period between July 1 - June 30. This evaluation shall be carried out according to a written plan established in policies 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, volunteers or other persons. The evaluation shall include an assessment to identify special populations of victims of human sex trafficking who are underserved or who have special needs including culturally or specific 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 75:30-9-4 shall be determined by a review of the program evaluation, policies and procedures, staff meeting minutes and/or any other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19]

75:30-9-5. Critical incidents

- (a) The program shall have policies and procedures requiring documentation and reporting of critical incidents.
- (b) Each critical incident shall be recorded and monitored as follows:
 - (1) Agency name, name and signature of the person(s) reporting the critical incident;
 - (2) Client ID(s), staff member(s), volunteers 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 or volunteer 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; and

(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, including electronic 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; and

(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, including electronic mail to the Office of the Attorney General Victims Services Unit.

(d) Compliance with 75:30-9-5 shall be determined by a review of policies and procedures, critical incident reports at the program and those submitted to the Office of the Attorney General Victims Services Unit.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

SUBCHAPTER 11. PERSONNEL AND VOLUNTEERS

PART 1. PERSONNEL

75:30-11-1. 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. Prior to employment all certified programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of employees to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all certified programs are required to conduct a name search of employees

against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippey Violent Crime Offenders Registration Act.

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

(d) Compliance with 75:30-11-1 shall be determined by a review of the program's personnel policies and procedures, interviews with staff and volunteers, review of staff meeting minutes and/or other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19]

75:30-11-2. 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 75:30-11-2 shall be determined by a review of the program's written policy and procedure, and staff interviews.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-2 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-3, which had been editorially renumbered to 75:30-11-2. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-3. Selection of personnel

(a) The methods for selecting personnel shall be described in policies 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 75:30-11-3 shall be determined by:

- (1) Review of the policies and procedures;
- (2) Review of job descriptions for personnel; and
- (3) Review of any other supporting documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-3 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-4, which had been editorially renumbered to 75:30-11-3. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-4. 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 75:30-11-4 shall be determined by:
 - (1) Review of the program's policies and procedures; and
 - (2) Review of the program's job descriptions.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-4 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-5, which had been editorially renumbered to 75:30-11-4. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-5. Personnel records

- (a) The agency shall maintain record(s) for each staff member or volunteer 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 75:30-11-5 shall be determined by a review of personnel records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-5 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-8, which had been editorially renumbered to 75:30-11-5. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-6. Supervision of personnel

- (a) A certified program shall establish in writing lines of supervision for all personnel.
- (b) Compliance with 75:30-11-6 shall be determined through a review of the program's policies and procedures, or any other supporting documentation provided, including, but not limited to, personnel manuals, organizational charts, job descriptions, and personnel files.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-6 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-9, which had been editorially renumbered to 75:30-11-6. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-7. 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 or volunteer's job description;
- (4) Each evaluation shall be individually discussed with the staff or volunteer;
- (5) Personnel shall have a documented opportunity to respond, in writing, to each of their individual performance evaluations; and
- (6) Both staff or volunteer and supervisor shall sign and date the performance evaluation. However, the evaluation document shall state the staff's or volunteer's signature does not necessarily constitute agreement with the evaluation content.

(b) Compliance with 75:30-11-7 shall be determined by a review of:

- (1) Program policies and procedures, governing authority meeting minutes where applicable, and
- (2) Review of personnel files.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-7 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-10, which had been editorially renumbered to 75:30-11-7. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

PART 3. VOLUNTEERS

75:30-11-8. 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. Prior to direct services volunteering, all certified programs are required to obtain an Oklahoma State Bureau of Investigation (OSBI) criminal history name search of volunteers to also include a search of the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary

Rippy Violent Crime Offenders Registration Act. At least annually thereafter, all certified programs are required to conduct a name search of direct services volunteers against the registries maintained pursuant to the Oklahoma Sex Offenders Registration Act and the Mary Rippy Violent Crime Offenders Registration Act.

(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 75:30-11-8 shall be determined by a review of the program's written policies and procedures, and volunteer interviews.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19]

Editor's Note: ¹*In the text of Section 75:30-11-8 that became effective on 7-11-11, subsection (c) contained a cross reference to Section 75:30-6-12, which had been editorially renumbered to 75:30-11-8. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-9. Supervision of volunteers

(a) The program shall establish in writing lines of supervision for all volunteers.

(b) The program shall ensure each volunteer has the knowledge relevant to the volunteer's job duties and is supervised pursuant to program policies and procedures.

(c) Compliance with 75:30-11-9 shall be determined through a review of the program's policies and procedures, and any other supporting documentation provided, including, but not limited to, volunteer manuals, and organizational charts.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 35 Ok Reg 882, eff 9-14-18]

Editor's Note: ¹*In the text of Section 75:30-11-9 that became effective on 7-11-11, subsection (c) contained a cross reference to Section 75:30-6-13, which had been editorially renumbered to 75:30-11-9. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-11-10. 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 75:30-11-10 shall be determined by a review of personnel records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-11-10 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-6-14, which had been editorially renumbered to 75:30-11-10. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

PART 5. TRAINING

75:30-11-12. Orientation - general, personnel and volunteers

(a) Personnel and volunteers must receive specific training to understand the unique needs of human sex trafficking victims.

(b) A certified program shall provide a minimum of forty (40) hours of 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) Learning interviewing skills and techniques for working with victims of human sex trafficking including:
 - (A) Hotline calls from trafficking victims and active and empathetic listening techniques; and
 - (B) Safety planning for human sex trafficking victims;
- (8) Vicarious trauma and self-care;
- (9) Client rights;
- (10) Power and control tactics in human sex trafficking;
- (11) Dynamics and impact of sexual assault;
- (12) Dynamics and impact of human sex trafficking;
- (13) Behavioral health issues related to human sex trafficking including but not limited to:

- (A) Cultural information about victims coming from the world of human sex trafficking to a "normal" world;
 - (B) Effects of trauma, including high risk behaviors, adaptive survival strategies and coping skills; and
 - (C) Trauma triggers.
- (14) Documentation of services;
 - (15) Sexual abuse within the family (i.e., incest, sibling abuse, marital and domestic relationship rapes);
 - (16) Sexual assault outside the family (stranger, non-stranger, abuse by professionals, sexual harassment and bullying);
 - (17) Commercial sexual exploitation (i.e., prostitution, trafficking, pornography, escort services, and massage parlors);
 - (18) Underserved client populations (i.e., males, victims of the same gender, bisexual or transgender, non-English speaking, undocumented immigrants, victims with cognitive disabilities, or who are deaf or hard of hearing) or other disability as defined by the Americans with Disabilities Act; and
 - (19) Topics to increase skills to identify Post-traumatic Stress Disorder (PTSD) as it relates to rape trauma,, self injury and alcohol and substance use.
 - (20) Training on professional ethics and boundaries necessary for working with trauma survivors.
 - (21) Understanding legal needs of human sex trafficking victims, including dynamics involved in the prosecution of persons who commit human sex trafficking.
 - (22) Labor trafficking.
 - (23) Trauma informed care and special considerations for victims of sex trafficking.
- (c) Staff and volunteers providing indirect services and children's activities are required to complete orientation as prescribed by the Executive Director or CEO which shall include training on confidentiality and facility safety and disaster plans.
- (d) Orientation for personnel must take place within thirty (30) days of employment or prior to unsupervised direct client contact and services. Volunteer orientation must occur within six (6) months or prior to unsupervised, direct client contact and services. The Executive Director or CEO of a facility may waive orientation training if it is documented that the staff or volunteer has completed the requisite program training within the past year.
- (e) Compliance with 75:30-11-12 shall be determined by a review of the written policies and procedures, and personnel and volunteer training manuals and records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-11-12.1. In-service and ongoing training for personnel and volunteers

- (a) A certified program shall have policies and procedures mandating, at the minimum, twenty-four (24) 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,
 - (5) Client rights;
 - (6) Legal and ethical issues;
 - (7) Trauma; and
 - (8) The remaining hours of annual training shall be related to human sex trafficking and administration as prescribed and approved by the Executive Director.
- (b) A certified program shall have policies and procedures mandating a minimum of twenty-four (24) hours annual training of all volunteers providing direct services, related to human sex trafficking as prescribed and approved by the Executive Director.
- (c) Staff and volunteers who provide indirect services and do not meet the requirements for staff and volunteers providing direct services as defined in OAC 75:30-1-2 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) Compliance with 75:30-11-12.1 shall be determined by a review of policies and procedures; review of training records and other provided documentation of personnel training; and a review of personnel or volunteer records.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 38 Ok Reg 1701, eff 9-11-21 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

75:30-11-13. Personnel training, sexual assault services [REVOKED]

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Revoked at 31 Ok Reg 820, eff 9-12-14]

75:30-11-14. Provider training, Safe Home services [REVOKED]

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Revoked at 31 Ok Reg 820, eff 9-12-14]

75:30-11-15. Personnel training, transitional living services

- (a) Prior to providing any direct services, all transitional living services personnel shall receive the prescribed orientation training in 75:30-11-12.
- (b) Compliance with 75:30-11-15 shall be determined by:
- (1) Review of program's policies and procedures;
 - (2) Review of program's training records and other provided documentation of staff or volunteer training; and

- (3) Review of personnel records.

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-11-16. 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 75:30-11-16 shall be determined by:

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

[Source: Added at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

75:30-11-17. 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 75:30-11-17 shall be determined by:

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

[Source: Added at 33 Ok Reg 1226, eff 9-11-16]

SUBCHAPTER 13. GOVERNING AUTHORITY

75:30-13-1. 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 by-laws 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;
 - (7) Establishment of a quorum; and
 - (8) Conflict of interest agreement.
- (c) Compliance with 75:30-13-1 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; and
 - (3) Review of the governing authority's minutes.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-13-1 that became effective on 7-11-11, subsection (c) contained a cross reference to Section 75:30-7-1, which had been editorially renumbered to 75:30-13-1. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-13-2. Duties of the governing authority

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

- (1) Approving all policies for the operation of the agency, and ensuring procedures for the implementation of policies 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 contractual agreements that exceed financial thresholds as determined by the governing authority;
- (7) Review the program audit and certification reports from the VSU and approve all plans of correction; and
- (8) Oversee the financial administration of the program, including review and approval of financial audits.

(b) Compliance with 75:30-13-2 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.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

Editor's Note: ¹*In the text of Section 75:30-13-2 that became effective on 7-11-11, subsection (b) contained a cross reference to Section 75:30-7-3, which had been editorially renumbered to 75:30-13-2. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-13-3. 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 75:30-13-3 shall be determined by the review of the meeting minutes of the governing authority.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ¹; Amended at 33 Ok Reg 1226, eff 9-11-16]

Editor's Note: ¹*In the text of Section 75:30-13-3 that became effective on 7-11-11, subsection (c) contained a cross reference to Section 75:30-7-4, which had been editorially renumbered to 75:30-13-3. The agency later corrected this cross reference in amendments that became effective 9-11-16.*

75:30-13-4. Governing authority, orientation

- (a) A certified program shall provide a minimum of two (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 policies and procedures;
 - (3) Underlying philosophy [OAC 75:30-1-1.1];
 - (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) Sexual violence as a result of human sex trafficking;

- (8) Open Meeting Act and recording of meeting minutes;
 - (9) Open Records Act;
 - (10) Rules, including standards and criteria to ensure multi-cultural needs of clients are met, 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 ninety (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 75:30-13-4 shall be determined by a review of written policies and procedures, training materials, training records, and minutes of meetings.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16]

SUBCHAPTER 15. CLIENT RIGHTS, FOR ADULT VICTIMS OF HUMAN SEX TRAFFICKING PROGRAMS

75:30-15-1. Applicability

This Part is applicable to those human sex trafficking programs certified by the OAG pursuant to 74 O.S. § 18p-1 et seq.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14]

75:30-15-2. Client rights

(a) Each client shall be afforded 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 the client from harm, abuse, and neglect;
- (4) Each client has the right to an environment which provides reasonable privacy, promotes personal dignity, and provides physical and emotional safety;
- (5) Each client has the right to receive services suited to the client's needs without regard to race, sex, color, age, national origin, genetic information, religion, degree of disability, or legal status;

- (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 the client's 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 free exercise of 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 offered prompt, competent, appropriate services and an individualized service plan. The client shall be afforded the opportunity to participate in the creation of the client's service plan. The client may consent or refuse to consent to the proposed services;
- (12) The records of each client shall be treated as confidential. This confidentiality remains intact even after the client's death;
- (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 be subject to, any adverse conditions or services solely or partially because of having asserted her or his rights as stated in this section;
- (16) Upon request, each client has the right to review the client's own records. Upon written request, each client has the right to receive a copy of the client's records or authorize an attorney or other person to do so. The program must provide a copy within a reasonable amount of time. The portion of the client's records regarding mental health or substance abuse treatment, shall be released pursuant to the provisions of 43A O.S. § 1-109 and 42 CFR shall apply;
- (17) Each client has the right to know why services are refused and can expect an explanation concerning the reason why the client was refused particular services;
- (18) Each client has the right to voluntary services which are self-determined; and
- (19) Each client has the right to decide whether or not to participate in supportive services offered by the program.

- (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 to ensure each client is afforded, and has explained to him or her, these rights.
- (d) Client rights shall be visibly posted in client areas of the facility.
- (e) The OAG, in any investigation or program monitoring regarding client rights, shall have unimpeded access to clients, program records and program staff or volunteers.
- (f) Compliance with 75:30-15-2 and applicable federal laws and regulations shall be determined by a review of program policies and procedures, client records, on-site observation, written agreements, and/or other program documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 35 Ok Reg 882, eff 9-14-18 ; Amended at 36 Ok Reg 1390, eff 9-13-19 ; Amended at 38 Ok Reg 1701, eff 9-11-21]

75:30-15-3. 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, and program facility services timeframes for resolution of grievances by program staff or volunteers shall be seven (7) days unless appealed;
 - (B) Non-transitional living and non-program facility services' timeframes for resolution of grievances by program staff or volunteers 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, including the phone number, mailing address, and email address of the VSU of the OAG;
 - (6) Mechanism to monitor the grievance process and improve performance based on outcomes; and
 - (7) Annual review of the grievance policies and procedures, with revisions as needed.

(b) Compliance with 75:30-15-3 shall be determined by a review of program policies and procedures, client records, on-site observation, written agreements, and/or other program documentation.

[Source: Added at 28 Ok Reg 1931, eff 7-11-11 ; Amended at 31 Ok Reg 820, eff 9-12-14 ; Amended at 33 Ok Reg 1226, eff 9-11-16 ; Amended at 41 Ok Reg, Number 21, effective 7-25-24]

CHAPTER 35. OKLAHOMA WITNESS PROTECTION PROGRAM

[Authority: 74 O.S., § 18p-10]

SUBCHAPTER 1. OKLAHOMA WITNESS PROTECTION PROGRAM

75:35-1-1. Purpose

The rules found in this Chapter are hereby adopted by the Attorney General of Oklahoma to implement the *Oklahoma Witness Protection Plan* pursuant to authority granted by Title 74 O.S. 2012, § 18p-10 (c).

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-2. Definitions

The following words shall be understood in these rules to have the following meanings:

"Case investigator" representative of the Oklahoma Office of Attorney General through whom contact is maintained with the witness and through whom delivery of Support to the witness is ordinarily made and documented.

"Criminal action" criminal proceedings initiated pursuant to the provisions of Title 22 of the Oklahoma Statutes.

"Dangerous perpetrator" a person who has committed or is committing, or who is alleged to have committed or is alleged to be committing, a criminal act, and who has by present or past conduct allegedly:

- (A) killed any person,
- (B) arranged with another to kill any person,
- (C) expressed or shown a willingness to kill any person,
- (D) expressed or shown a willingness to arrange a killing of any person,
- (E) inflicted serious bodily harm upon any person,
- (F) arranged the infliction of bodily harm upon any person,
- (G) expressed or shown a willingness to inflict bodily harm upon any person,
- (H) expressed or shown a willingness to inflict bodily harm upon any witness having evidence relevant to the prosecution of a criminal act,
- (I) expressed or shown a willingness to inflict bodily harm upon any relative or significant other to any witness having evidence relevant to the prosecution of a criminal act,
- (J) closely allied with or associated with a person who is a dangerous perpetrator.

"Government investigator" a duly commissioned Federal, State, County or Municipal law enforcement officer.

"Grand jury" includes both County and Multicounty grand juries empaneled pursuant to the *Oklahoma Constitution* and the Oklahoma Statutes.

"Immediate family" means a spouse, parent, child, stepchild, sibling, grandparent, household member, or legal representative of a witness, except when such person is in custody for an offense or is the dangerous perpetrator regarding whom the witness is actively assisting law enforcement.

"Investigation" the gathering of evidence of criminal activity by either a grand jury or governmental officers or by a combination thereof. Also included are investigative depositions pursuant to 22 O.S.2011, § 258(Second).

"Participant" Witnesses approved pursuant to these rules. Immediate family if approved for participation pursuant to these rules.

"Program" the Oklahoma Witness Protection Program.

"Prosecuting attorney" Either the District Attorney or Assistant District Attorney with venue jurisdiction for the offense under investigation, or a Unit Chief of jurisdiction for the offense under investigation, Office of Attorney General of Oklahoma.

"Prosecution" includes all phases of the investigation, charging, and litigation of a criminal act or acts.

"Support" provision of State funds for certain financial support of participants in the program, including but not limited to:

- (A) Temporary living costs including lodging rent and per diem not to exceed the per diem authorized to State employees traveling on State business;
- (B) Witness relocation (moving) expenses, including but not limited to the relocation of the person of program participants and the moving and/or storing of personal property of program participants;
- (C) Security deposits for residential rental property used by relocated witnesses;
- (D) Travel expenses to and from court not to exceed those authorized to State employees traveling on official business;
- (E) Other necessary approved temporary expenses related to relocation or transition."

"VSU" the Victims Services Unit of the Oklahoma Office of Attorney General.

"Witness" any natural person having evidence relevant to the prosecution of a criminal act who is actively aiding the prosecution of a dangerous perpetrator by:

- (A) providing truthful information regarding criminal activity to a government investigator; or,
- (B) being subpoenaed to and/or testifying before a grand jury; or,
- (C) being subpoenaed to and/or testifying in any investigative deposition admissible as evidence in a grand jury proceeding; or,
- (D) being subpoenaed to and/or testifying in any phase of a criminal action, including all preliminary hearings, motion

hearings, and trial proceedings.

"Witness" also includes any such person after the person has given truthful information to a government investigator and/or testified at grand jury, and/or testified in an investigative deposition, and/or testified in proceedings in any phase of a criminal action.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-3. Applicability

The rules found in this Chapter shall govern the manner and procedure governing the making of all applications for *Support* by a witness seeking *Support* through the *Program*, all decisions for granting or denying *Support* thereon, all payments of all *Support* upon approved applications, the duration of *Support* under the *Program* and grounds for termination of a *Participant* from the *Program*; whether initiated through a District Attorney of jurisdiction or through Unit Chief of jurisdiction in the Oklahoma Office of Attorney General.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-4. Scope of the Program

The *Program* is only legally authorized to provide certain limited and temporary *Support* services to *Participants*. Physical protection of *Participants* accepted into the *Program* remains a function of local law enforcement.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-5. Administration and Procedure

- (a) The Program shall be administered pursuant to these Rules by the Victims Services Unit of the Oklahoma Office of Attorney General.
- (b) A witness seeking *Support* under the *Program* shall complete an *Application for Support Services* using the approved form, *See* 75:35-1-7.
- (c) A witness seeking *Support* under the *Program* shall also approve and attach to the *Application for Support Services* a *Memorandum of Understanding* using the approved form, *See* 75:35-1-7. In the event any immediate family members over the age of eighteen (18) years of age will also be seeking *Support* services in connection to the witness, such persons must also separately approve and sign a *Memorandum of Understanding* that must also be attached to the witness' *Application for Support Services*. All persons making application for Support services shall subscribe the following statement under penalty of perjury: "I am either a citizen of the United States or am a qualified alien under the federal Immigration and Nationality Act, and accordingly I am lawfully present in the United States."
- (d) Copies of all approved program forms may be obtained by a witness:
 - (1) through the Victim Witness Coordinator of the local Office of District Attorney,
 - (2) through a posting on the website of the Office of Attorney General.

(3) An *Application for Support Services*, upon completion and together with all attachments, shall initially be submitted to and reviewed by the *Prosecuting Attorney* who shall either recommend approval or rejection of the application based upon the facts known to the *Prosecuting Attorney* that have been developed in the investigation for which the applicant is a witness and the suspect/defendant is shown to be a dangerous perpetrator. The *Prosecuting Attorney* shall attach either an investigation report(s) or witness summary factually showing the applicant to be a material witness to an offense involving a dangerous perpetrator. The *Prosecuting Attorney* shall also attach a Triple I criminal background check regarding the applicant witness and any other person seeking support services in connection to the witness.

(4) Upon completion and review by the *Prosecuting Attorney*, all *Applications for Support Services* shall be submitted to the Unit Chief for the *VSU* for processing pursuant to these Rules. The *VSU* shall prepare and attach to the *Application* an itemized calculation of *Support* needed by the witness and/or immediate family.

(5) The award of *Support* under the *Program* is not an entitlement, but may be approved at the discretion of the Attorney General of Oklahoma or the First Assistant Attorney General as based upon need demonstrated in the *Application for Support Services* together with its attachments and the actual availability of funds. An adult relocated program participant shall ordinarily be expected to promptly establish employment in the place of relocation. Except under extraordinary circumstances approved solely at the discretion of the Office of Attorney General, an adult program participant shall not receive *Support* in either per diem living expenses nor rent for any period more than six (6) months from the date of the approval of an *Application for Support Services*, or until the witness becomes locally employed and capable of self-support, whichever is shorter. Any extension of *Support* beyond this period shall require submission and approval of a new *Application for Support Services*.

(6) Any award of *Support* under the *Program* shall always be conditioned upon the strict compliance by the program participant to all of the requirements set forth in the *Memorandums of Understanding* attached to the participant's *Application for Support Services*, as determined by Office of Attorney General.

(7) All *Support* paid directly to a witness under the *Program* shall ordinarily be in the form of currency that shall ordinarily be delivered in person to the program participant by a case investigator. Alternatively, payments of currency made directly to a witness as *Support* may be delivered through a person approved by the Unit Chief of the *VSU*. Payment of *Support* may also be paid directly to a private provider of services when such payment is determined by the Office of Attorney General to be advisable. Documentation of the payment of *Support* to a program

participant shall always be made in the form of a written receipt signed by the program participant in the presence of the case investigator or approved designee who shall also certify thereon the payment's date of delivery, *See* 75:35-1-7.

(8) Prior to trial in the case, and at such other times determined to be necessary, the case investigator shall prepare a report in writing disclosing all *Support* payments made by the Program to the witness by amount, date, and reason for the payment, shall transmit a copy of the report to the prosecuting attorney in the case, and provide a copy thereof to the Unit Chief of the *VSU* of the Office of Attorney General.

(9) Payment for all approved *Support* shall be from available funds deposited to the Attorney General's Evidence Fund, Title 74 O.S. 2012, § 19, or from funds received from any federal grants awarded for the operation of the *Program*, *See* 74 O.S. Supp. 2012, §18p-10(A). Determination of the availability of funds shall be within the sole judgment of the Attorney General or the First Assistant Attorney General reviewing the application.

(10) In the administration of the *Program*, the Office of Attorney General will not unlawfully discriminate on the basis of race, sex, color, age, religion, creed, political affiliation, disability, or national origin.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-6. Confidentiality of Program Records

The purpose of the *Program* is for the State of Oklahoma to provide witness protection services to persons who by reason of actively aiding the State of Oklahoma may be in danger of death or bodily harm, *See* 74 O.S. Supp. 2012, §18p-10(A). The Attorney General hereby finds that open access to records pertaining to the *Program* will defeat the legal purpose for the program by identifying *Program* applicants and/or participants and by providing past or current locations for such persons. Accordingly, all records pertaining to the *Program* including, but not limited to all applications for *Support* under the *Program*, together with all records of any and every kind related thereto, are hereby found and declared to be confidential and privileged from disclosure as trial preparation materials of the State of Oklahoma, *See* 12 O.S. 2011, § 3226(B) and exempt from disclosure under the Oklahoma Open Records Act, *See* 51 O.S. 2011, § 24a.5(1)(a). *See also*, 51 O.S. 2011, § 24A.12, 22 O.S. 2011, § 2510, 74 O.S. 2011, § 19a, and *Merrill v. Oklahoma Tax Commission*, 831 P.2d 634, 639-640 [holding that State agencies shall make the initial determination whether its records are exempt from Open Records disclosure], and shall be disclosed only as provided in these rules. All *Program* records shall be subject to the regular audit of the State Auditor and Inspector and disclosed to that Office for such purposes as required for the performance of such audits, *See* 74 O.S. 2011, § 212; provided auditors and audits shall keep confidential the actual and/or alias identities and locations of all persons applying for and/or receiving *Support* under the *Program*.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

75:35-1-7. Required Forms

- (a) The *Application for Support Services* shall be upon Form 1 consisting of three (3) pages, a copy of which is appended hereto.
- (b) The *Memorandum of Understanding* with a witness or other program participant over the age of eighteen (18) years of age shall be upon Form 2 consisting of one (1) page, a copy of which is also appended hereto.
- (c) Receipt for *Support* shall be documented upon Form 3, a copy of which is appended hereto.

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

APPENDIX A. APPLICATION

Figure 1

The Attorney General of the State of Oklahoma
Witness Protection Program
Application for Support Services
(Form 1)

Name
First: _____ Middle Initial: _____ Last: _____

Current Address: _____

Names of all persons also living at the above address, together with relationship to you:

I hereby make application for *Support* services due to my being a witness in an investigation of and/or criminal proceeding regarding _____, a person whom I believe is a dangerous person for one or more of the following reasons based upon my knowledge or belief (check all applicable):

This person:

- I. has killed another person,
- II. has arranged with another to kill another person,
- III. has expressed or has shown a willingness to kill another person,
- IV. has expressed or has shown a willingness to arrange a killing of any person,
- V. has inflicted serious bodily harm upon another person,
- VI. has arranged the infliction of bodily harm upon another person,
- VII. has expressed or shown a willingness to inflict bodily harm upon another person,
- VIII. has expressed or shown a willingness to inflict bodily harm upon me or my friends or family if I give truthful testimony about what I know about this person,

Figure 2

IX. is closely allied with or associated with another person who is also dangerous for one or more of the above reasons.

	<u>I need the following help:</u>	<u>Amount</u>
X.	money to assist me to move from my current residence.	\$ _____
XI.	money to pay a rent deposit for another residence.	\$ _____
XII.	money to temporarily assist me to pay rent because I have become unemployed or temporarily cannot go to work at my present job.	\$ _____
XIII.	money to temporarily assist me to purchase food because I have become unemployed or temporarily cannot go to work at my present job.	\$ _____
XIV.	money to temporarily assist me to travel to a new place of residence.	\$ _____
	other needs: (completely describe your other monetary needs caused by your need to relocate. Use reverse side of form as necessary):	\$ _____

APPLICANT'S CERTIFICATION

I believe I am presently in physical danger because I am a witness and that I need to re-locate my residence. I understand that this *Application for Support Services* from the Oklahoma Attorney General Witness Protection Program is only for the purpose of receiving a grant of public money as temporary *Support* services in order to relocate where I presently live and that my physical protection remains a function of local law enforcement and is not guaranteed by acceptance into this assistance program. I understand and agree that if I am accepted as a participant in the Oklahoma Attorney General Witness Protection Program that I will be assigned a case investigator to whom I will always personally provide my current address. I also understand and agree that if I am approved as a *Program* participant, the assigned case investigator or another approved person will personally provide me *Support* payments for which I will always be required to sign written receipt(s). I further understand and agree to conform myself to all of the provisions of the attached *Memorandum of Understanding and Contract* and that immediate termination of all *Support* may occur upon the failure by me or by any of my protected family members to comply with any and all provisions of the *Memorandum of Understanding and Contract*. I also understand and agree that in the event termination of *Support* occurs due to non-compliance with the *Memorandum of Understanding and Contract*, I will return all monies paid to me for *Support* to the Oklahoma Attorney General Witness Protection Program. I also understand and agree that I will need to promptly seek and obtain employment in my place of relocation because absent extraordinary circumstances all temporary *Support* in the form of per diem living expenses and residential rent will terminate no later than six (6) months from and after the date of my acceptance in the *Program*. I HEREBY MAKE THE FOLLOWING STATEMENTS UNDER PENALTY OF PERJURY: "All information given by me above in this application is true and based upon my personal knowledge, understanding, and belief. All information I have provided to law enforcement is true and based upon my personal knowledge and understanding. I am either a

Figure 3

citizen of the United States or am a qualified alien under the federal Immigration and Nationality Act, and accordingly I am lawfully present in the United States.”

(Signature of Applicant)

Prosecuting Attorney's Review

I am the prosecuting attorney regarding the matter involving the following suspect/defendant _____. This is a person who, based on information available to me, (is / is not) a dangerous perpetrator due to one or more of the criteria set forth above on page 1 of this application. The within applicant has presented this application to me for review and based upon the facts that have been developed in the investigation reported to me as prosecuting attorney I (do / do not) believe this applicant to be a material witness to this matter as illustrated by the attached investigation report(s) or witness summary, and regarding this application for Support services needed for relocation of the witness' current residence:

XIII. I recommend that the witness be provided support services

XIV. I do not recommend that the witness be provided support services

(Signature)

(Title)

Attorney General Action

I hereby find, based upon the information provided to me in the within *Application for Support Services*, together with all attachments thereto and public funds available for such purposes:

XV. That needed *Support* as further recommended by the OAG Victims Service Unit in the memorandum attached hereto, is approved.

XVI. That Support is denied.

(Signature)

(Title)

CONFIDENTIAL AND PRIVILEGED – NOT AN OPEN RECORD

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

APPENDIX B. MEMEORANDUM OF UNDERSTANDING

Figure 1

**The Attorney General of the State of Oklahoma
Witness Protection Program**

Memorandum of Understanding and Contract

I, _____, as a participant in the Oklahoma Witness
Protection Program, promise and agree to conform my actions according to the following requirements:

(Form 2)
(Print name)

- (1) I will provide complete and truthful information to all relevant law enforcement officials including but not limited to the staff of the Victim Services Unit of the Office of the Oklahoma Attorney General, as related to official investigations, and if called as a witness I will testify completely and truthfully in all proceedings.
- (2) I will not commit any federal, state, or local crime.
- (3) I will take all necessary precautions and steps to avoid making known to others my participation in the witness protection program including, but not limited to, immediately ceasing any and all electronic "blogging" together with all participation in any and all electronic social media including but not limited to FaceBook, Twitter, etc.
- (4) I will promptly comply with any legal obligations or civil judgments.
- (5) I will cooperate with all reasonable requests of officers and employees of the state who are providing protection services.
- (6) I will designate another person to act as an agent for the service of process upon me.
- (7) I will make a sworn statement of all outstanding legal obligations, including obligations concerning child custody and visitation, and child support.
- (8) I will disclose any probation or parole conditions, obligations, or responsibilities to my assigned case investigator.
- (9) I will regularly inform my case investigator of my activities and current address and will immediately report any change of address to my case investigator.
- (10) I will promptly seek and obtain regular employment in my place of relocation and will promptly notify my assigned investigator concerning any change of status regarding such.
- (11) I will comply with such other specific conditions as are appropriate, stated directly and without ambiguity to me, so as to be understandable to a reasonable person.

(Signature)

CONFIDENTIAL AND PRIVILEGED – NOT AN OPEN RECORD

[Source: Added at 31 Ok Reg 839, eff 9-12-14]

APPENDIX C. RECEIPT

Figure 1

**The Attorney General of the State of Oklahoma
Witness Protection Program**

Receipt

(Form 3)

I, _____, a participant in the OAG Witness Protection Program, do
(print participant's name)
hereby acknowledge that on the ____ day of _____, 20__, I received good and lawful
currency in the amount of _____ dollars and _____ cents (\$_____) from the person whose name appears below as a grant of temporary Support under the program.

(participant's signature)

I, _____, hereby certify that on the above-stated date I
(print case investigator's or approved designee's name)
provided Support funds pursuant to the OAG Witness Protection Program to the above-named participant in the form of currency in the above-stated amount that the participant counted in my presence and acknowledged was the amount delivered prior to the participant signing this receipt in my presence.

(case investigator's or approved designee's signature)

CHAPTER 40. OPIOID ABATEMENT BOARD [EXPIRED]

Editor's Note: *This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Chapter, the Chapter is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), Chapter 40 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

[Authority: 74 O.S. 2021, §§ 30.1 through 30.8]

SUBCHAPTER 1. GENERAL PROVISIONS [EXPIRED]

75:40-1-1. Purpose [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: ¹*This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-1-1 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

75:40-1-2. Definitions [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: ¹*This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-1-2 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

SUBCHAPTER 2. POLITICAL SUBDIVISIONS OPIOID ABATEMENT GRANTS [EXPIRED]

75:40-2-1. Opioid grant award process [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: ¹*This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-2-1 was no*

longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.

75:40-2-2. Opioid grant award restrictions and requirements [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: *¹This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-2-2 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

75:40-2-3. Disbursement process [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: *¹This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-2-3 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

75:40-2-4. Remaining unencumbered balance [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: *¹This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-2-4 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

75:40-2-5. Oversight and quarterly reporting [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: *¹This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Section, the Section is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), 75:40-2-5 was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

APPENDIX A. OPIOID DISTRIBUTION CALCULATION TABLE [EXPIRED]

[Source: Added at 40 Ok Reg 137, eff 10-19-22 through 9-14-23 (emergency)¹]

Editor's Note: ¹*This emergency action expired without being superseded by a permanent action. Upon expiration of an emergency action enacting a new Appendix, the Appendix is no longer effective. Therefore, on 9-15-23 (after the 9-14-23 expiration of the emergency action), Appendix A was no longer effective. For the official text of the emergency rule that was effective from 10-19-22 through 9-14-23, see 40 Ok Reg 137.*

CHAPTER 45. PHARMACY BENEFIT MANAGEMENT COMPLIANCE AND ENFORCEMENT

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 1. GENERAL PROVISIONS

75:45-1-1. Purpose

This chapter sets forth definitions, rules of procedure, and for hearings governed by the Attorney General for pharmacy benefit management enforcement compliance and enforcement.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-1-2. Definitions

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

"Administrative law judge" means a licensed Oklahoma attorney who has been appointed as an administrative law judge by the Attorney General to oversee and conduct administrative hearings.

"Attorney General" means the Attorney General of the State of Oklahoma who serves as the chief law officer of the state pursuant to 74 O.S. § 18.

"Administrative Hearings Division" means the administrative judicial forum where administrative law judges appointed by the Attorney General to hear cases where the Office of the Attorney General has jurisdictional authority.

"Office of the Attorney General" means the state agency where the Attorney General serves as the agency head.

"Supreme Court" means the Supreme Court of the State of Oklahoma.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 2. RULES OF PROCEDURE

75:45-2-1. General Provisions

(a) **Confidentiality.** All parties and the Administrative Law Judge shall have a duty to preserve the confidentiality of protected health information of patients as required under federal or state law.

(b) **Public hearings.** All hearings conducted by the Office of the Attorney General shall be public and held in accordance with the Administrative Procedures Act. The use of cameras or other audio-visual recording equipment shall comply with Rule 39.1 of the Oklahoma County District Court Rules.

(c) **Computation of time.** When filing documents in the proceeding, the following provisions apply:

(1) **Filing deadlines.** In computing any period of time, begin on the day after the act or event, and conclude on the last day of the computed period, unless it be a Saturday, Sunday, or legal holiday, in which the period runs until the end of the next day which is neither a Saturday, Sunday, nor a legal holiday.

(2) **Filing and evidence of filing.** Documents required to be filed are considered filed on the date of personal service of such documents or upon the date of the postmark showing date mailed on the envelope containing such documents and must show a date on or before the last day of filing as defined above.

(3) **Use of certified or registered mail.** If the document is sent by United States registered mail, the date of registration of the document shall be treated as the postmarked date. If the document is sent by United States certified mail and the sender's receipt is postmarked by the postal employee, the date of the United States postmark on such receipt shall be treated as the postmark date of the document. Thus, the risk that the document will not be postmarked on the day that it is deposited in the mail may be overcome by the use of registered mail or certified mail.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-2. Administrative Hearings Division and Administrative Law Judges

(a) **Appointments.** The Attorney General may appoint administrative law judges as needed.

(b) **Administrative Hearings Division.** The court setting for all hearings and matters considered by administrative law judges appointed by the Attorney General shall be conducted in a forum known as the Administrative Hearings Division.

(c) **Session hours.** Unless otherwise ordered by the assigned administrative law judge, the morning sessions shall begin at 9:00 a.m. and close at 12:00 noon, and the afternoon sessions shall begin at 1:30 p.m. and close at 4:30 p.m.

(d) **Assigned administrative law judge.** An administrative law judge shall have complete authority to conduct the proceedings and may take any action not inconsistent with the provisions of the rules of this Chapter or of the APA for the maintenance of order at hearings and for the expeditious, fair, and impartial conduct of the proceedings. The assigned administrative law judge has the discretion to waive, supplement, or modify any requirement of the applicable law or rule of procedure where permitted by law and when the administration of justice requires. The assigned administrative law judge may also:

- (1) arrange and issue notice of the date, time and place of hearings and conferences;
- (2) establish the methods and procedures to be used in the presentation of the evidence;
- (3) hold conferences to settle, simplify, determine, or strike any of the issues in a hearing, or to consider other matters that may facilitate the expeditious disposition of the hearing;

- (4) administer oaths and affirmations;
- (5) regulate the course of the hearing and govern the conduct of participants;
- (6) examine witnesses;
- (7) rule on, admit, exclude and limit evidence;
- (8) establish the time for filing motions, testimony, and other written evidence, briefs, findings, and other submissions, and hold the record open for such purposes;
- (9) rule on motions and other pending procedural matters; and
- (10) divide the hearing into stages or combine interests of parties whenever the number of parties is large or the issues are numerous and complex.

(e) **Hearing Clerk.** The Hearing Clerk is the person designated by the Attorney General to assist the Chief Administrative Law Judge and maintain the administrative hearing files and dockets within the Office of Administrative Hearings.

(f) **Ex parte communications.** Communication with the assigned administrative law judge or their office regarding scheduling and procedural matters is permitted. A lawyer shall have no ex parte communication on the substance of a pending matter or proceeding with the assigned administrative law judge.

(g) **Disqualification of Administrative Law Judge.**

(1) The administrative law judge shall withdraw from any proceeding in which they cannot accord a fair and impartial hearing or consideration, stating on the record the reasons therefore, and shall immediately notify all parties of the withdrawal.

(2) Any party may file a motion requesting the administrative law judge withdraw on the basis of personal bias or other disqualification and specifically setting forth the reasons for the request. This motion shall be filed as soon as the party has reason to believe there is a basis for the disqualification. The administrative law judge shall rule on the motion and make a recommendation to the Attorney General. The Attorney General shall review the recommendation of the administrative law judge and make a final determination on disqualification.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-3. Commencement of Proceeding and Service of Notice

(a) **Petition & Notice.** A petition and notice of hearing shall comply with the notice requirements under the Administrative Procedures Act. At any time following the filing of a petition and notice of hearing, any party may request the administrative law judge hold a scheduling conference to set hearing dates and discovery deadlines. The administrative law judge shall hold a scheduling conferencing within thirty (30) days of a party's request.

(b) **Service of Notice.** Service of notice shall be complete upon personal service, upon receipt of a return of service card showing receipt of certified mail by the addressee, or upon the posting of notice or last

publication thereof.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-4. Legal Representation and Appearances

(a) **Legal Representation.** All parties must appear through counsel licensed by the Oklahoma Supreme Court and in good standing with the Oklahoma Bar Association. Counsel not licensed by the Oklahoma Supreme Court who has complied with the requirements of Article II, Section 5 of the Oklahoma Bar Association Rules may appear on behalf of a party with leave of the administrative law judge.

(b) **Entry of Appearance.** Attorneys who appear on behalf of a party shall notify the Office of Administrative Hearings of their appearance by filing an entry of appearance.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-5. Pleadings

(a) **Filings.** All filings shall be made with the Office of Administrative Hearings. Staff with the Office of Administrative Hearings will be responsible for placing a date-stamp on any pleadings filed by a party.

(b) **Initiating a Proceeding.** Proceedings may be initiated before the Office of Administrative Hearings by the Oklahoma Attorney General's Office by filing with the Office of Administrative Hearings a Petition or other instrument that seeks any relief authorized by law. Each Petition shall name the Respondent and include a statement of the legal authority and jurisdiction under which the proceeding is to be held, a reference to the particular sections of the statutes and rules involved, a short and plain statement of the matters asserted giving a right to relief, the relief requested, and, unless provided in a separate written Notice of Hearing, the time, place and nature of the hearing. If the Office of the Attorney General is unable to give a short and plain statement of the matters asserted at the time the notice is served, the initial notice may be limited to a statement of the issues involved.

(c) **Motions, Applications, and Briefs.** When filing motions and/or briefs in a proceeding, the following provisions apply:

(1) **Margins and page length.** All written submissions shall be typewritten in clear type not less than 12-point, with single-spaced lines of quoted matter and double-spaced lines of unquoted matter. The margins of the printed page shall be one and one-quarter (1 1/4) inches on the left side and one (1) inch on the other three sides.

(2) **Accompanied by proposed order.** Motions and applications are to be accompanied by a proposed order.

(3) **Length.** All motions, applications and responses thereto, including briefs, shall not exceed twenty (20) pages in length, excluding exhibits, without prior permission of the assigned administrative law judge. A request for enlargement of page length may accompany the written instrument filed. Reply briefs shall be limited to five (5) pages in length. Page limitations herein

exclude only the cover, if used, index, appendix, signature line and accompanying information identifying attorneys and parties, and certificate of service. No further briefs shall be filed without prior permission of the assigned administrative law judge. Exceptions to this requirement are not favored. This limitation on page limits does not apply to initial filings.

(4) **When responses are due.** Unless otherwise ordered by the assigned administrative law judge, objections to motions or responses to written submissions are due within fifteen (15) days of receipt. Replies to objections or to responses to written submissions are due within ten (10) days of receipt. Exceptions to this requirement may be granted upon application and for good cause shown.

(5) **Hearings upon motions or applications.** The assigned administrative law judge shall decide any motion or application without hearing based upon the written submissions of the parties unless the assigned administrative law judge determines that an evidentiary hearing is necessary for a proper resolution of the issue(s) submitted.

(6) **Disposition of unopposed motions.** Dispositive motions that are unopposed may be deemed to be confessed and, where appropriate, may result in the summary disposition of a claim or defense as applicable.

(7) **Motions filed close to hearing.** Motions may not be filed within ten (10) days of the hearing unless based upon a sudden emergency of facts that could not have been previously known. Copies of such motions must be hand-delivered to all parties of record.

(8) **Motions will not stay discovery.** Motions to Dismiss or for Summary Disposition will not stay any discovery deadline unless by a written agreement of the parties that has been communicated to the assigned administrative law judge.

(9) **Citations of authority.** Legal citations are to be made in accordance with Rule 1.200 the Oklahoma Supreme Court Rules. If an unpublished case or a case cited by a special reporter is cited as persuasive authority a copy must be attached to the document citing the case.

(d) **Service of pleadings.** Service of pleadings shall comply with the provisions of the Oklahoma Pleading Code.

(1) **Service of Initial Pleading.** Any instruments initiating an administrative proceeding must be served on every named Respondent by either personal service, certified mail, return receipt requested, restricted delivery, or issuing a report by hand-delivery. If service is being sent by certified mail, return receipt requested, and the intended Respondent refuses to sign the return receipt or otherwise does not sign or is unavailable to sign and accept service through the certified mail at the address identified on records from the Office of the Attorney General, then Respondent is deemed to have been served. If service is by personal service, the person serving the instrument initiating an administrative proceeding shall file proof of service with the

Hearing Clerk within seven (7) days of service or before the date of the first hearing, whichever is sooner. Acknowledgment in writing by the Respondent, or their legal counsel, or by appearing at the hearing without objection to service is equivalent to service.

(2) **Service of Other Papers and Documents.** Service of all other documents and papers connected with a proceeding shall be served on the parties or their counsel by delivering a copy or mailing a copy by first class mail, postage prepaid.

(3) **Service of Responsive Pleadings.** Any party served with a petition, an application for an administrative fine, an administrative order or other instrument providing notice of a claim or defense to a claim initiating a proceeding before the Attorney General shall file a written response or answer within twenty (20) days of receipt of the petition, application, order or other instrument initiating a proceeding. The response or answer must be filed with the Hearing Clerk of the Office of Administrative Hearings and a copy must be delivered or mailed to all other parties by 5:00 p.m., on the 20th day. Delivery to other parties must be made in person, by process server, or may be sent by certified mail, return receipt requested, or restricted delivery. Every defense, in law or fact, to a claim for relief in any petition, application or administrative order initiating an administrative proceeding shall be asserted in the responsive pleading.

(e) **Signature block.** All pleadings shall be signed and include the signature block for the counsel submitting the pleading. The signature block shall include the name of the attorney, bar number, firm name (if applicable), address, telephone number, and email address for all attorneys of record.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-6. Discovery

(a) **Discovery Code.** The Attorney General hereby adopts the Oklahoma Discovery Code, 12 O.S. §§ 3224-3237, to govern discovery under the Act.

(b) **Record.** Unless ordered by the Administrative Law Judge, discovery shall not be filed in the record.

(c) **Timing.** Discovery shall be open for a minimum of ninety (90) days. Unless good cause is shown or by agreement of the parties, no discovery shall not exceed one hundred eighty (180) days.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-7. Subpoenas

(a) **Issuance.** The Attorney General hereby adopts the Oklahoma Pleading Code, 12 O.S. § 2001-2100, to govern subpoenas under the Act. All parties shall have the authority to issue subpoenas under the Oklahoma Pleading Code.

(b) **Failure to obey.** The party issuing the subpoena may seek an appropriate judicial proceeding to compel compliance by persons who fail to obey a subpoena, who refuse to be sworn or make an affirmation at a hearing or who refuse to answer a proper question during a hearing. The hearing shall proceed despite any such refusal but the assigned administrative law judge may, in their discretion at any time, continue the proceedings as necessary to secure a court ruling.

(c) **Motions to quash.** Motions to quash subpoenas may be filed with the Office of Administrative Hearings and may be decided by the assigned administrative law judge. The assigned administrative law judge shall not quash a subpoena if any party objects.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-8. Evidence

The Attorney General hereby adopts the Oklahoma Evidence Code, 12 O.S. §§ 2101-2611.2, to govern proceedings under the Act.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-9. Protective Orders

(a) **Automatic Protective Order.** At the time that a matter has been filed with the Office of Administrative Hearings all personal health information of any party or witness that comes into the possession of a party to pending matter is subject to an automatic protective order. The automatic protective order generally limits any party in possession of such information from publishing the information to any third party without first making application to the assigned administrative law judge supported by good cause. Third parties shall not include any person employed or affiliated with an attorney or their office who is representing a party to the proceeding. Third parties also do not include consultants or expert witnesses retained by an attorney or their office.

(b) **General Protective Orders.** Unless provided in subsection (a) of this subchapter of rules, all other protective orders shall be governed by the Oklahoma Discovery Code, 12 O.S. §§ 3224-3237, and 51 O.S. § 24A.29. It is the responsibility of the attorney to ensure all consultants and/or expert witnesses comply with the provisions of the rules governing automatic protective orders.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-10. Motion for Summary Disposition

Following the close of discovery, a party may file a motion for summary disposition on any or all issues on the ground that there is no genuine dispute as to any material fact. The procedures for such a motion are as follows:

(1) The motion for summary disposition shall be accompanied by a concise written statement of the material facts as to which the movant contends no genuine issue exists and a statement of argument and authority demonstrating that summary disposition

of any or all issues should be granted. The moving party shall verify the facts to which such party contends no genuine controversy exists with affidavits and evidentiary material attached to the statement of material facts.

(2) If the case has been set for a hearing on the merits, a motion for summary disposition shall be served at least twenty (20) days before the hearing date unless an applicable scheduling order issued by the administrative law judge establishes an earlier deadline. The motion shall be served on all parties and filed with the Office of Administrative Hearings.

(3) Any party opposing summary disposition of issues shall file with the administrative law judge within fifteen (15) days after service of the motion a concise written statement of the material facts as to which a genuine issue exists and the reasons for denying the motion. The adverse party shall attach to the statement evidentiary material justifying the opposition to the motion but may incorporate by reference material attached to the papers of the moving party. All material facts set forth in the statement of the movant that is supported by acceptable evidentiary material shall be deemed admitted for the purpose of summary disposition unless specifically controverted by the statement of the adverse party which is supported by acceptable evidentiary material.

(4) The affidavits that are filed by either party shall be made on personal knowledge, shall show that the affiant is competent to testify as to the matters stated therein and shall set forth matters that would be admissible in evidence at a hearing. A party challenging the admissibility of any evidentiary material submitted by another party may raise the issue expressly by written objection or motion to strike such material.

(5) If a party has requested a hearing, the administrative law judge will issue a notice to the parties scheduling the motion for a hearing limited to oral argument. If the party has not requested a hearing, the administrative law judge will rule on the motion based on the submission of the parties, including the motion, opposition to the motion, and attachments thereto.

(6) If the administrative law judge finds that there is no substantial controversy as to the material facts and that one of the parties is entitled to a decision in its favor as a matter of law, the administrative law judge will grant summary disposition by issuing Findings of Fact, Conclusions of Law, and Recommendations. Such Findings of Fact, Conclusions of Law, and Recommendations are subject to review by the Attorney General under OAC 75:45-2-16. If a motion for summary disposition is denied, the administrative law judge will issue an order denying such motion. The Attorney General is not required to review a denial of a motion for summary disposition.

(7) If the administrative law judge finds that there is no substantial controversy as to certain facts or issues, the administrative law judge may grant partial summary disposition by issuing an order within twenty (20) business days of the

hearing that specifies the facts or issues that are not in controversy and directing that the action proceed for a determination of the remaining facts or issues. If a hearing of factual issues is required, evidentiary rulings in the context of the summary procedure shall be treated as rulings in limine. Any ruling on partial summary disposition shall be incorporated into the Findings of Fact, Conclusions of Law, and Recommendations issued at the conclusion of the proceedings before the administrative law judge. Such Findings of Fact, Conclusions of Law, and Recommendations are subject to review by the Attorney General under OAC 75:45-2-16.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-11. Hearings

(a) **Conflict between APA and Rules.** Unless in conflict with the Administrative Procedures Act ("APA"), the order of procedure in all proceedings shall be governed by this Chapter. In the event of a conflict between the APA and this Chapter, the APA controls. To the extent that this Chapter is more specific than the APA, the Attorney General intends for the rules in this Chapter to control.

(b) **Notice of Hearings.** The Attorney General, the Chief Administrative Law Judge, or the assigned administrative law judge, shall schedule the date, time, and place of any hearing in accordance with these rules. The Hearing Clerk shall notify the parties. The initial hearing shall be scheduled at least thirty (30) days after the date of service of the initial filing. If a specific law requires a hearing in fewer days, that statute shall be followed.

(c) **Hearing Proceedings.** At the hearing, each party may make a brief opening statement; present witnesses, documents, and exhibits on its behalf; and cross-examine adverse witnesses. The right to make a closing statement or argument shall be at the discretion of the assigned administrative law judge. At the discretion of the assigned administrative law judge, any party may reopen the case in chief, even after the adverse party has rested. Parties may stipulate to any lawful matter.

(d) **Recording.** All pre-hearing proceedings and hearings shall be electronically recorded as required by section 309 of the Administrative Procedures Act.

(e) **Court reporter.** Upon written request to the Office of Administrative Hearings, a hearing will be electronically recorded and transcribed by a certified court reporter. The requesting party must make necessary arrangements with the Office of Administrative Hearings, bear the cost of the reporter's attendance, and bear the cost of the transcription of the proceeding. The requesting party shall furnish the administrative law judge an original and all counsel of record in a case a copy of the transcript.

(f) **Testimony under oath.** The testimony of witnesses shall be under oath or affirmation, and the making of false statements may subject a witness to the penalties of perjury.

(g) **Standards of proof.** The standard of proof in all proceedings affecting or prejudicing a license, registration, permit, certification, or other authorization to engage in a given livelihood or occupation shall be clear and convincing evidence. In all other matters the standard of proof shall be a preponderance of the evidence.

(h) **Rulings.** The assigned administrative law judge shall rule on the admissibility of evidence and objections to evidence, and on motions or objections raised during hearings. All objections shall be made promptly or be deemed waived. Parties shall be deemed to have taken exception to any adverse ruling.

(i) **Fees.** The ordinary fees and costs of a hearing may be assessed by an administrative law judge against the respondent unless the respondent is the prevailing party. No fees shall be assessed against the Attorney General or Office of the Attorney General.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-12. Pre-hearing Procedure

(a) **Purpose.** All matters pending before the Office of Administrative Hearings are subject to pre-hearing procedures determined by the assigned administrative law judge to be appropriate for a prompt and efficient resolution to matter. At least one pre-hearing conference will routinely be ordered unless the assigned administrative law judge determines the same to be unnecessary.

(b) **Pre-hearing Conference Procedure.**

(1) The pre-hearing conference shall be used to resolve any dispute or matter the resolution of which would promote the orderly and prompt conduct of the pre-hearing process or a hearing on the merits. The assigned administrative law judge may hold more than one prehearing conference, convert a pre-hearing conference into a scheduling conference, or hold a final pre-hearing conference to formulate the plan to streamline the hearing on the merits. The conference shall be informal, structured by the assigned administrative law judge and not open to the public. No witnesses shall appear or present evidence.

(2) The assigned administrative law judge shall notify the parties of the date, time, and place of any pre-hearing conference at least ten (10) days before the scheduled date. A pre-hearing conference may be held by electronic or virtual means.

(3) If a record is requested by the parties, the conference may be recorded by audio tape and/or transcribed by a court reporter at the requesting party's expense.

(4) If a final pre-hearing conference is ordered, the attorneys and/or any unrepresented parties shall confer prior to the final pre-hearing conference and prepare a single suggested Pre-hearing Conference Order for use during the conference and the hearing on the merits. Any party unable to secure the cooperation of another party may submit their own proposed Pre-hearing Conference Order and, if the other party's cooperation is shown to be without cause, request that the other party's Proposed Pre-

hearing Conference Order be stricken. A Pre-hearing Conference Order must follow substantially the form provided in Rule 5 of the Rules for District Court, 12, O.S., Ch.2, App.

(5) The administrative law judge shall issue an order within ten (10) business days of a pre-hearing conference. Such order, when entered, controls the subsequent course of the proceeding, unless modified by the administrative law judge.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-13. Continuances

Each party is entitled to a single continuance of the hearing on the merits upon request submitted at least three (3) days in advance of the hearing unless exigent circumstances make such notice impractical. Additional continuances may be granted only upon good cause. Motions for a continuance based upon cause shall be in writing and filed with the Office of Administrative Hearings with a copy to the parties and the assigned administrative law judge. A motion for a continuance shall state the reason(s) for the request and specify the length of time requested.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-14. Default

Any Respondent who fails to appear as directed, after service of the instrument initiating an administrative proceeding as provided by these rules, may be determined to have waived the right to appear and present a defense to the allegations contained in the instrument that initiates a proceeding. A default judgment order in such proceeding may be issued by the assigned administrative law judge and reviewed by the Attorney General under OAC 75:45-2-16, granting by default the relief prayed for in the petition.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-15. Sanctions for Noncompliance

The assigned administrative law judge may take any action allowed by law against any party as a sanction for any non-compliance with the rules in this chapter, including, but not limited to, imposition of costs and fees, including attorney's fees, monetary sanctions not to exceed \$10,000, and/or by granting default.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-16. Findings, Conclusions, and Recommendations

(a) **The Attorney General.** The Attorney General shall be the ultimate authority in approving all final orders, conclusions, and recommendations of an administrative law judge.

(b) **Issuance.** After the record in an administrative proceeding is closed and submitted, the administrative law judge shall issue Findings, Conclusions, and Recommendations to the Attorney General for final

consideration. The Findings, Conclusions, and Recommendations will include a statement of facts, the issues and contentions, conclusions based on the findings of fact and applicable law, and recommendations by the administrative law judge to the Attorney General who can make a binding recommendation to the Insurance Commissioner, if applicable. The parties to the proceeding will be mailed copies of the administrative law judge's Findings, Conclusions, and Recommendations. The assigned administrative law judge may take the cause of action under advisement and shall issue an order within twenty (20) business days.

(c) **No appeal.** No appeal may be based upon the Findings, Conclusions, and Recommendations issued by the administrative law judge until a final review and decision has been made by the Attorney General.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-17. Motion for Rehearing, Reopening, or Reconsideration

Motions for rehearing, reopening, or reconsideration shall comply with section 317 of the Administrative Procedures Act and must be submitted in writing. Oral motions for rehearing, reopening, or reconsideration will not be heard.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-18. Appeal Venue

Appeals shall be taken pursuant to section 318 of the Administrative Procedures Act in the District Court of Oklahoma County.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-19. Settlement Agreements and Consent Orders

Unless precluded by law, a proceeding may be resolved by a settlement or consent order. A settlement or consent order shall be approved by the Attorney General. Consent orders shall first be approved by the assigned administrative law judge prior to obtaining the approval of the Attorney General.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-20. Record

(a) **Records maintained.** The record of a proceeding and the file containing the notices and the pleadings will be maintained in a location designated by the Office of Administrative Hearings. All pleadings, motions, orders and other papers submitted for filing in such a proceeding shall be date/file-stamped by the Office of Administrative Hearings upon receipt. The burden of showing substantial prejudice by any failure to correctly file-stamp any submission shall be upon the party asserting the same.

(b) **Designation on appeal.** On appeal, the parties may designate and counter-designate portions of the record pursuant to the Administrative Procedures Act.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-2-21. Access to Hearing Records Pursuant to the Open Records Act

(a) **Official records.** For purposes of this section, "official records" means any record that was created as a result of a public hearing by the Office of Administrative Hearings.

(b) **Access to official records.** Requestors may request records pertaining pharmacy benefit management compliance and enforcement in writing to the Office of the Attorney General, either electronically or by mail.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 3. PHARMACY BENEFIT MANAGERS

75:45-3-1. Purpose

This subchapter sets forth definitions and procedures for Pharmacy Benefit Managers as governed by the Attorney General.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-3-2. Definitions

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

"Act" means the Patient's Right to Pharmacy Choice Act.

"Pharmacy benefits management" means the administration and/or management of prescription drug benefits provided by a covered entity under the terms and conditions of the contract between the pharmacy benefits manager and the covered entity.

"Pharmacy benefits manager" or "PBM" means a person who performs pharmacy benefits management activities and any other person acting for such person under a contractual or employment relationship in the performance of pharmacy benefits management for a covered entity.

"Workers Compensation Pharmacy Benefits Manager" or **"WCPBM"** means a pharmacy benefit manager providing managed pharmacy care to workers' compensation claimants.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-3-3. Power and Authority To Examine and Investigate

(a) **Power and Authority of the Attorney General.** The Attorney General shall have the power and authority under 36 O.S. § 6965 to examine and investigate the affairs of every pharmacy benefits manager (PBM) engaged in pharmacy benefits management in this state in order to determine whether such entity is in compliance with 59 O.S §§ 357-360 and 36 O.S. §§ 6958-6968.

(b) **Timing of the Attorney General to Examine a PBM.** The Attorney General may examine the PBM at any time under 36 O.S. § 6965 in which the Attorney General believes it reasonably necessary to ensure compliance with 59 O.S §§ 356-360 and 36 O.S. §§ 6958-6968 or provisions of this subchapter.

(c) **Examination of PBM Files and Records.** All PBM files and records shall be subject to examination by the Attorney General or by duly appointed designees. The Attorney General, or any authorized employees and examiners, shall have access to any of a PBM's files and records that may relate to a particular complaint under investigation or to an inquiry or examination by the Attorney General.

(d) **Duty to Respond to an Inquiry.** Every officer, director, employee or agent of the PBM, upon receipt of any inquiry from the Attorney General, shall, within twenty (20) days from the date the inquiry is sent, furnish the Attorney General with an adequate response to an inquiry from the Attorney General's Office.

(e) **Subject Matter Experts and Investigative Costs.** When making an examination under 36 O.S. § 6965, the Attorney General may retain subject matter experts, attorneys, appraisers, independent actuaries, independent certified public accountants or an accounting firm or individual holding a permit to practice public accounting, certified financial examiners or other professionals and specialists as examiners, the cost of which shall be borne by the PBM that is the subject of the examination. Nothing requires that a formal action be filed against the PBM to recover costs associated with an examination under 36 O.S. § 6965.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-3-4. Contractual Requirements

(a) Maximum Allowable Cost.

(1) **Contracts.** Contracts between a PBM and a provider shall conform to the following requirements:

(A) Identify sources of information utilized by the PBM to create and modify the PBM's maximum allowable cost price specific to the pharmacy;

(B) The PBM shall provide an electronic process, including but not limited to e-mail, for its pharmacy providers to readily access the MAC list specific to that provider. Upon a provider's written request, a PBM shall furnish its MAC list to the provider in paper form or other agreed format;

(C) If a provider is unable to obtain a drug from a regional or national wholesaler at a price equal to or less than the PBM's multisource drug product reimbursement, the PBM shall provide a reasonable appeals procedure to contest the multisource drug product reimbursement amount; under this section, a "reasonable appeals procedure" means a process which permits a provider or a provider's representative to contest a multisource drug product reimbursement amount based on the provider's contention that the drug is not generally available for purchase by Oklahoma pharmacies in the state at or below the PBM's multisource drug product reimbursement;

(D) A provider's appeal shall contain information including but not limited to the date of claim, National Drug Code number, and the identity of the national or regional wholesalers from which the drug was found to be unavailable for purchase by the provider, at or below the PBM's multisource drug product reimbursement;

(E) Appeals filed under this subsection shall be presented to the PBM within ten (10) business days following the final adjusted payment date. The PBM must respond to a provider within ten (10) business days following the receipt by the PBM of the notice that the provider is contesting the multisource drug product reimbursement amount;

(F) If a provider's appeal is denied, the PBM shall provide the reason for the denial, including the National Drug Code number and the identity of the national or regional wholesalers from whom the drug was generally available for purchase by providers in the state at or below the PBM's multisource drug product reimbursement;

(G) If a provider's appeal is found to be justified, the PBM shall make a change in the multisource drug product reimbursement amount, permit the provider to reverse and re-bill the claim in question, and make the multisource drug product reimbursement amount change applicable prospectively for all similarly contracted Oklahoma providers.

(2) **Submitting an Appeal.** A PBM shall permit the submission of either paper or electronic documentation to perfect an appeal. A PBM shall not require the submission of appeals on an individual claim (non-batch) basis or refuse to accept appeals from a provider's designated representative or require procedures that have the effect of obstructing or delaying the appeal process. All multisource drug product reimbursement appeals shall be properly documented.

(3) **Required Certificate from PBM.** Before beginning business, and as contracts are amended thereafter, each PBM shall submit to the Office of the Attorney General a certificate signed by an executive officer of the PBM attesting that the Oklahoma provider contracts utilized by such PBM satisfy the requirements of the act.

(b) **Relationship of PBM.** The relationship between a PBM and an insurer or other payor is controlled by contract whereby the PBM acts on behalf of the payor to facilitate the delivery of prescription medication benefits provided by such payor. Requirements and limitations contained within the act and applicable to such payors must be understood within this payor-contractor relationship.

(c) **Interaction Between PBM and Retail Pharmacy Network Providers.** The act requires or limits certain conduct in the interaction between the PBM and retail pharmacy network providers. Consequently, the Attorney General's Office hereby requires that every insurer utilizing the services of a pharmacy benefit manager shall be responsible, as follows:

- (1) for approving all contractual documents utilized by its contracted PBMs and its retail pharmacy network to ensure compliance with the act;
- (2) for conducting an annual audit of transactions and practices utilized by its contracted PBMs and members of its retail pharmacy network to ensure compliance with the act; and
- (3) any exceptions found shall be reported to the Attorney General's Office pursuant to the Attorney General's examination authority.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-3-5. Retail Pharmacy Network Access - Audit

(a) **Authority.** The Attorney General shall review and approve retail pharmacy network access for all pharmacy benefits managers (PBMs) to ensure compliance with 36 O.S. § 6961.

(b) **Standards.**

- (1) 36 O.S. § 6960 defines a member of a "retail pharmacy network" as meaning retail pharmacy providers contracted with a PBM on behalf of a payor in which the pharmacy primarily fills and sells prescription medicine via retail storefront location.
- (2) Pursuant to 36 O.S. § 6961(B), mail-order pharmacies shall not be used to meet access standards for retail pharmacy networks.
- (3) Pursuant to 36 O.S. § 6961(C), PBMs shall not require patients to use pharmacies that are directly or indirectly owned by a PBM, including all regular prescriptions, refills, or specialty drugs regardless of the day supply.
- (4) Pursuant to 36 O.S. § 6961(D), PBMs shall not in any manner on any material, including but not limited to mail and ID cards, include the name of any pharmacy, hospital, or other providers unless it specifically lists all pharmacies, hospitals, and providers.

(c) **Required Monitoring by PBM.** A PBM's retail pharmacy network access shall be monitored for compliance with this act by those insurers that utilize the services of such PBM. Health insurers are required to maintain retail pharmacy network access in conformity with the requirements set forth in 36 O.S. § 6961.

(d) **Required Annual Audit by PBM.** Every PBM shall conduct a network adequacy audit on an annual basis. If the audit reveals the percentage of covered individuals is less than one hundred and five percent (105%) above any of the required percentages in 36 O.S. § 6961, the PBM shall conduct semi-annual network adequacy audits until such time that an audit indicates that the percentage of covered individuals is more than five percent 5% above the required percentage. A PBM shall submit all audit reports on network adequacy, including any semi-annual network adequacy audits, to the Attorney General.

(e) **Timing to Submit Audit Findings and Reports.** The audits must be completed within ninety (90) days of the effective date of 36 O.S. § 6958-6968 and annually each year thereafter. The results of any audits shall be reported to the Attorney General within thirty (30) days of the completion of the audit. All mailed documents must be directed to the attention of the "PBM Enforcement and Compliance Unit." The PBM Enforcement and Compliance Unit may issue further guidance to PBMs on the process for submitting required reports to the Attorney General's Office.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:45-3-6. Penalties for Enforcement, Noncompliance, and Recovery of Costs

(a) **Recommendations to the Insurance Commissioner by the Attorney General.** After notice and opportunity for hearing before an administrative law judge, and upon an order of the administrative law judge that has been approved by the Attorney General that a PBM has violated any of the provisions of 36 O.S. §§ 6958-6968 of the Oklahoma Statutes or the administrative rules set out in Title 75 of the Oklahoma Administrative Code, the Attorney General may make a recommendation to the Insurance Commissioner that a PBM's license be suspended or revoked and/or that fines, of not less than One Hundred Dollars (\$100.00) and no greater than Ten Thousand Dollars (\$10,000.00), for each count, be levied against any PBM that has violated the provisions of 36 O.S. §§ 6958-6971. The Insurance Commissioner shall accept and adopt any recommendation of the Attorney General pursuant to 36 O.S. § 6966.1.

(b) **Final Order of the Attorney General.** In addition to the remedies in subsection (a), and after notice and opportunity for hearing before an administrative law judge, a PBM may be subject to a civil fine of not less than One Hundred Dollars (\$100.00) and not greater than Ten Thousand Dollars (\$10,000.00) for each violation of the provisions of the Patient's Right to Pharmacy Choice Act, the Pharmacy Audit Integrity Act or the provisions of Sections 357 through 360 of Title 59 of the Oklahoma Statutes. Any order issued under this subsection shall be approved by the

Attorney General.

(c) **Closer Supervision Related to a General Business Practice.** If the Attorney General determines, based upon an investigation of complaints, that a PBM has engaged in violations of the provisions of the Patient's Right to Pharmacy Choice Act with such frequency as to indicate a general business practice, and that the PBM should be subjected to closer supervision with respect to those practices, the Attorney General may require the PBM to file a report at any periodic interval the Attorney General deems necessary.

(d) **Failure to Respond to an Inquiry.** Failure to respond timely to an inquiry from the Attorney General's Office shall be grounds for sanctions pursuant to this section, including, but not limited to, fines of at least One Hundred Dollars (\$100) and shall not exceed Ten Thousand Dollars (\$10,000), for each violation, and/or a binding recommendation from the Attorney General to the Insurance Commissioner that a PBM's license be censured, suspended, or revoked. The payment of expenses incurred by the Attorney General's Office for any legal fees and costs including, but not limited to, staff time, salary and travel expenses, witness fees, and attorney fees, may be levied as part of any non-compliance with this section.

(e) **Penalty for Failure to Timely Submit Audit or Report Findings.** Failure to respond timely to the deadline to file an audit or examination report shall be considered a violation of OAC: 75:45-3-4 and/or 36 O.S. § 6962. Unless an agreement by a PBM and the Attorney General has been entered into regarding the timing to submit an audit or examination report, a PBM shall be subjected to an administrative fine of at least five hundred dollars (\$500) per day for each day the PBM fails to comply with the reporting requirements.

(f) **Restitution and Cost Recovery.** Restitution may be levied as part of any disciplinary action against a PBM to be paid to the provider or patient involved. In addition to restitution, the cost of recovery related to the disciplinary action may be levied against a PBM for expenses incurred by the Attorney General's Office for any legal fees and costs including, but not limited to, staff time, salary, and travel expense, witness fees, and attorney fees.

(g) **Investigative Costs.** When making an examination under 36 O.S. § 6965, the Attorney General may retain subject matter experts, attorneys, appraisers, independent actuaries, independent certified public accountants or an accounting firm or individual holding a permit to practice public accounting, certified financial examiners or other professionals and specialists as examiners, the cost of which shall be borne by the PBM that is the subject of the examination. Nothing requires that a formal action be filed against the PBM to recover costs associated with an examination under 36 O.S. § 6965.

(h) **Enforcement.** The payment of any penalty issued pursuant to these rules may be enforced in the same manner as civil judgments may be enforced.

75:45-3-7. Reports on Rebates and Costs

(a) PBMs shall report rebate and cost-related data to the Attorney General as required under section 6692(D)(5) of title 36 of the Oklahoma Statutes on a quarterly basis.

(b) The required reports shall be submitted using the template provided on the Office of the Attorney General's website and sent to the email address provided on the website.

(c) Required reports shall be submitted no later than the first day of the month three months following the end of the quarter for which the PBM or WCPBM is reporting.

(d) WCPBMs shall report the same data to the Attorney General on an annual basis instead of a quarterly basis no later than July 1 of each year.

[Source: Added at 41 Ok Reg, Number 21, effective 7-25-24]

CHAPTER 50. OPIOID SETTLEMENT PAYMENTS AND ABATEMENT GRANTS

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 1. GENERAL PROVISIONS

75:50-1-1. Purpose

This chapter sets forth rules, including standards and criteria, for, and operations and distributions of, the Opioid Abatement Board created by the Political Subdivisions Opioid Abatement Grants Act (74 O.S. §§ 30.3-30.8).

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:50-1-2. Definitions

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

"Act" means the Political Subdivisions Opioid Abatement Grants Act, codified at 74 O.S. §§ 30.3-30.8.

"Applicant" means any eligible participant that has submitted an application for an opioid grant award to the Board.

"Application" means the Opioid Abatement Grant Application approved by the Board.

"Approved Purpose" or **"Approved Purposes"** means the same as 74 O.S. § 30.5(1) and uses of funds that are reasonable and necessary for the proper and efficient performance and administration of the grant project, and allocable to the grant project.

"Board" means the Oklahoma Opioid Abatement Board established by 74 O.S. § 30.7.

"Contract" means the agreement between the Board and a Recipient setting forth responsibilities of Recipients regarding the use of opioid grant award funds.

"Eligible participant" means the same as 74 O.S. § 30.5(3).

"Form" means Opioid Abatement Grant Award Quarterly Reporting Form approved by the Board.

"Nonapproved purpose" or **"Nonapproved purposes"** means the same as 74 O.S. § 30.5(4).

"Opioid funds" means the same as 74 O.S. § 30.5(5).

"Opioid grant awards" means the same as 74 O.S. § 30.5(6).

"Political subdivision" means the same as 74 O.S. § 30.5(9).

"Recipient" means any eligible participant that has applied for and received an opioid grant award.

"Revolving Fund" means the Oklahoma Opioid Abatement Revolving Fund established under 74 O.S. § 30.6.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 2. OPIOID SETTLEMENT PAYMENTS

75:50-2-1. Distributors and retailers & Allergan settlement payment disbursement process for non-litigating political subdivisions

(a) This section shall only apply to non-litigating political subdivisions that elected to participate in the opioid distributors and retailers & Allergan settlements and submitted a participation form waiving any future claims against the named defendants, Allergan, AmerisourceBergen, Cardinal Health, CVS, McKesson Corp., Walgreens, and Walmart.

(b) The Board shall conduct disbursement of opioid grant awards from the Revolving Fund.

(c) Such opioid grant awards shall be awarded amongst the different Applicants based on the following criteria:

(1) the number of people per capita suffering from opioid use disorder in the participating political subdivision, or in the absence of such information, the opioid prescription rate in the political subdivision compared to the national average opioid prescription rate;

(2) the number of opioid overdose deaths in the participating political subdivision;

(3) the amount of opioids distributed within the participating political subdivision; and

(4) the amount of attorney fees and allowable expenses associated with legal services agreements directly related to opioid litigation incurred as part of legal services agreements entered into before May 21, 2020.

(d) Disbursements from the Revolving Fund shall be computed using the table set forth in Appendix A to these rules, factoring in the above criteria, to compute the final grant award amounts for applicants. To the extent that any of the criteria are allocated by another manner or process, Appendix A is deemed satisfactory for determining the weight of each criterion.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

SUBCHAPTER 3. OPIOID ABATEMENT GRANTS

75:50-3-1. Opioid grant application process

(a) The Board shall provide the Application on the Office of the Attorney General's website. The Attorney General may, acting on behalf of the board, digitize the entire application process.

(b) Applications will be reviewed by the Board, which will allocate funds consistent with the requirements under the Act.

- (c) The Board may delegate review of completed applications to the Office of the Attorney General and to whomever it finds qualified, capable, and possessing necessary capacity.
- (d) Applicants shall sign and return to their completed applications to the Office of the Attorney General via mail or by electronic means as determined by the Office of the Attorney General.
- (e) Public trusts shall submit the most recent copy of their declaration of trust or trust indenture with their application.
- (f) Applicants must submit data correlating to any criteria requested by the Board.
- (g) Grant applicants must apply for a grant award using the procedures, forms, and certifications prescribed by the Board. Any incomplete applications or applications lacking in sufficient detail may be returned to the applicant for completion, corrections, or supplementation. In the event an application remains incomplete or lacking in sufficient detail, the Attorney General may deny the application on the Board's behalf. The applicant submitting the denied application may then appeal the decision to the Board pursuant to section 5 of this subchapter.
- (h) Each grant applicant must designate an authorized official and must submit to the Board or its designee, the following:
 - (1) a resolution from the grant applicant's governing body that, at a minimum, designates an authorized official to act on the grant applicant's behalf and authorizes the authorized official to submit a grant application;
 - (2) the authorized official's title, mailing address, telephone number, and email address; and
 - (3) the grant applicant's physical address.
- (i) A grant applicant or grant recipient must notify the Board as soon as practicable of any change in the information provided under subsection (a) of this section. If there is a change of authorized official, a grant applicant or grant recipient must also submit to the Board a new resolution from the grant applicant's governing body that, at a minimum, designates an authorized official to act on the grant applicant's behalf.
- (j) Multiple (two or more) applicants may submit a joint application reflecting a collaborative and coordinated effort or project and will be eligible for a joint grant award in an amount as determined by the Board.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:50-3-2. Opioid grant award restrictions and requirements

- (a) Upon submitting an application, an applicant must also submit a memorialized plan for the utilization or expenditure of opioid funds. Such plan may be in the form in a resolution or equivalent government action adopted by the political subdivision and submitted to the Board with the application. Documentation evincing such government action may include, but is not limited to, the following:
 - (1) A resolution, as allowed by law, adopted through a publicly cast and recorded vote;
 - (2) An ordinance, or its equivalent, that has been approved through a publicly cast and recorded vote; or

- (3) An abatement plan or budget that has been approved through a publicly cast and recorded vote.
- (b) When submitting an application under section 1 of this subchapter, an applicant may not rely on a resolution or other general delegation of authority to a chief executive officer or equivalent position for seeking grants.
- (c) All approved purposes listed in an Applicant's Application and Form shall relate to strategies, programming and services occurred on or after January 1, 2015, to be eligible for opioid grant award funding.
- (d) For an Applicant to receive a grant award, the Board may, subject to terms under any settlement agreement related to the opioid pharmaceutical supply chain, require an applicant to execute a release of claims on a form created and approved by the Attorney General. The release form may be included in the Application. The release shall only apply to and release claims against any opioid supply chain participants or consultants for which the State of Oklahoma has joined a multi-party settlement or reached a settlement agreement with, including Purdue Pharmaceuticals, Teva Pharmaceutical Industries Ltd., Endo Pharmaceuticals, AmerisourceBergen, Cardinal Health, McKesson Corp., McKinsey & Company, CVS, Allergan, Walmart, and Walgreens.
- (e) To the extent that any recipient remains in litigation, it may elect to delay receipt of any disbursements of its opioid grant award on a form developed by the Office of the Attorney General staff.
- (f) A recipient may contract or partner with a nonprofit organization or other applicant for the purpose of using its grant award for approved purposes; however, the grantee shall remain responsible for complying with all grant requirements. Any contract entered into by a grantee shall be done in compliance with applicable purchasing laws and guidelines.
- (g) A recipient is not permitted to subgrant its grant award to a subgrantee. For the purposes of this chapter, "subgrant" means the provision of a grant award and whereby all the regulations and requirements that apply to the grantee are passed on to the subgrantee, making the grantee a pass-through entity. "Subgrantee" means any entity receiving the grant award through a subgrant from a grantee.
- (h) In the event a recipient merges, dissolves or ceases to exist as described under 74 O.S. § 30.8(C), the recipient must give prompt notice to the Board and the Office of the Attorney General, including the following information:
- (1) The amount of any remaining allocations of an awarded opioid grant award in excess of Five Hundred Dollars (\$500.00);
 - (2) The name of the proposed successor recipient, if any;
 - (3) Point of contact information for the proposed successor recipient, if any; and
 - (4) Utilize the Political Subdivision Opioid Abatement Grant Award Quarterly Reporting Form to submit a final report of expenditures prior to the merger, dissolution, or permanent closure.
- (i) In its discretion, the Board shall determine whether any of the Recipient's remaining allocations shall be made to the proposed successor recipient, or returned to the Board. Any successor recipient shall meet the requirements to be a recipient prior to receiving the

balance of the grant award disbursement. In addition, prior to receiving grant funds, the successor recipient must submit documentation requested by the Board and execute any and all documents required by the Board.

(j) All grant funding is contingent upon the availability of funds and upon approval of a grant application by the Board. Neither this subsection nor a grant agreement creates any entitlement or right to grant funds by a grant applicant.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:50-3-3. Maximum grant awards

(a) The amount of a grant award is determined solely in the discretion of the Board. The Board is not required to fund a grant in the amount requested by the Applicant. Maximum grant awards are based on an applicant's population or enrollment as established by the Board for each round of grant funding.

(b) The total population or enrollment for applicants that are public trusts solely benefiting one or more eligible participants shall be eligible based on the subdivision(s) they benefit. If a public trust benefits more than one type of political subdivision, the public trust will be eligible for maximum available funding under the tier appendix for which the majority of its beneficiary-political subdivisions are.

(c) A public trust's population or enrollment will be limited to the population or enrollment of the subdivision(s) that the public trust benefits as set forth in the declaration of trust or trust indenture.

(d) An interlocal cooperative formed under title 70 of the Oklahoma Statutes that is determined to be a local educational agency will be considered a school district, as that term is defined in 51 O.S. § 152.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:50-3-4. Application review and disbursement process; allowable costs

(a) Grant applications may be reviewed according to the following process: (1) initial screening, (2) peer review, and (3) Board review and approval. Applications submitted to the Board shall be scored using the scoring system determined by the Board for each round of grant funding.

(b) The Board shall conduct disbursement of opioid grant awards from the Revolving Fund.

(c) In awarding opioid abatement grants, the Board shall determine grant awards based the criteria set forth in subchapter 2, section 1, subsection c of this chapter and any other criteria it deems necessary and appropriate for the proper and wise use of opioid funds. This criteria may be included in the scoring system or in the Board-approved application.

(d) Following approval of grant amounts, all recipients shall receive a copy of the Contract, which they must complete and return to the Office of the Attorney General prior to receiving a disbursement of funds. The Contract can be returned by mail or electronic means as determined by

the Office.

(e) Recipients shall receive their grant award in the form of equal quarterly distributions.

(f) Applicants may request the first two payments be combined in their application submission to provide start-up funding for their project or abatement plan. The remaining balance of the grant award will disbursed in the same manner set forth in subsection e of this section.

(g) The Board shall set the grant term in a public cast and recorded vote at a properly noticed meeting.

(h) For good cause shown, Recipients in good fiscal and programmatic standing may request the Board to authorize a one-time carryover of up to forty percent (40%) of their grant award distributions following the expiration of the initial grant term. To be considered for a carryover authorization, the Recipient must submit a written request no later than 120 calendar days prior to expiration of the initial grant term, which must include:

- (1) a timeline of events beginning on the date of grant award;
- (2) a detailed explanation why the grant project is not expected to be completed within the grant term; and
- (3) if applicable, supporting documentation demonstrating good cause.

(i) Grant funds may not be used for costs that will be reimbursed by another funding source. The Board may require a grant recipient to demonstrate through accounting records that funds received from another funding source are not used for costs that will be reimbursed by the Board.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:50-3-5. Grant award appeals

(a) If an applicant wishes to appeal a grant award decision of the Board, the applicant may submit an appeal in writing to the Board within twenty (20) days of notification of a grant award decision.

(b) Appeals are limited to the following Board decisions:

- (1) Denial of funding for projects,
- (2) Denial of specific fund use requests, and
- (3) Denials of an application.

(c) Partial funding of projects are not to be deemed as denials and thus are non-appealable.

(d) An applicant will be granted a hearing in front of the Board. The Board may limit the amount of time for argument from both the appealing applicant and the Board staff. The hearing shall be recorded and any oral or written testimony must be given under oath. After the hearing, the Board may amend or affirm their original decision in writing.

(e) The decision of the Board following the hearing will be final and non-reviewable.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:50-3-6. Remaining unencumbered balance

Following disbursement, any remaining unencumbered balance in the Revolving Fund shall be available for the Board to award as supplemental grants to eligible Participants, provided such awards shall only be utilized by eligible Participants for Approved Purposes.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

75:50-3-7. Grant award quarterly reporting, oversight, and compliance

(a) The grant recipient is responsible for managing the day-to-day operations and activities supported by the grant agreement and is accountable to the Board for the performance of the grant agreement, including the appropriate expenditure of grant award funds and all other obligations of the grant recipient. The grant recipient must maintain a sound financial management system that provides appropriate fiscal controls and accounting procedures to ensure accurate preparation of reports required by the grant agreement and adequate identification of the source and application of grant funds awarded to the grant recipient. Grant recipients must comply with:

- (1) the terms and conditions of the grant agreement;
- (2) all applicable state or federal statutes, rules, regulations, or guidance applicable to the grant award. A grant recipient is the entity legally and financially responsible for compliance with the grant agreement, and state and federal laws, rules, regulations, and guidance applicable to the grant award.

(b) The Attorney General will, on behalf of the Board, maintain oversight and monitor compliance of expenditures by Recipients to ensure that any use complies with approved purposes as defined under the Act. As a part of the oversight and monitoring, the Attorney General and Board may conduct desktop or on-site reviews. During an on-site review, a grant recipient must provide the Board or Attorney General with access to all records, information, and assets that the Board or Attorney General determines are reasonably relevant to the scope of the on-site review.

(c) At a minimum, Recipients will be monitored through a quarterly reporting process.

(d) The Board shall utilize the Political Subdivision Opioid Abatement Grant Award Quarterly Reporting Form ("Form") to maintain oversight and confirm compliance with the Act. All Recipients must submit quarterly reports using the Form in order to continue receiving or using opioid grant award proceeds. Completed quarterly reports shall be returned to the Office of the Attorney General via mail or by electronic means as determined by the Office of the Attorney General. Quarterly reports shall be due on the last day of the month immediately following the conclusion of a quarter. If an opioid grant award is received during a quarter, a recipient is not required to submit a report for the remainder of the initial quarter until the conclusion of the next quarter for which reports for the initial quarter and the first full quarter shall be due.

(e) For the purposes of this chapter, quarters shall run by calendar year. January, February, and March shall be Quarter 1; April, May, and June shall be Quarter 2; July, August, and September shall be Quarter 3; and October, November, and December shall be Quarter 4.

(f) At the Board's discretion and at any time, the Board, may request any additional data and reporting information that the Board deems necessary to substantiate that grant funds are being used for the intended purpose and that the grant recipient has complied with the terms, conditions, and requirements of the grant agreement. Further, at the Board's discretion and at any time, the Board may request any records from or audit the books and records of a grant recipient or conduct an on-site review at a grant recipient's location to verify that the grant recipient has complied with the terms, conditions, and requirements of the grant agreement, and any applicable laws, rules, regulations, or guidance relating to the grant award. If it is determined that a Recipient is using opioid grant award proceeds out of compliance with Board procedures or has utilized such proceeds for non-approved purposes, the Board authorizes the Attorney General to immediately suspend the Recipient's use of the grant award proceeds and notify the Recipient.

(g) The Board may resume disbursements to the non-compliant recipient once it has determined the recipient has adequately remedied the cause of such suspension.

(h) For the purposes of the Act, an adequate remedy may include, but not be limited to the following:

(1) refunding an amount equal to the amount spent on nonapproved purposes or a reduction to future disbursements in the amount equal to the amount spent on nonapproved purposes.

(2) reducing or terminating a grant when the Recipient is found to be noncompliant, the Recipient and Board agree to the reduction or termination of a grant award, when grant funds are no longer available to the Board, or if conditions exist that make it unlikely that objectives of the grant award will be accomplished; or

(3) other remedies available under applicable laws, rules or regulations.

(i) The Board authorizes the Attorney General to negotiate adequate remedies with non-compliant recipients for presentation and approval by the Board.

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

**APPENDIX A. OPIOID DISTRIBUTION CALCULATION
TABLE**

Criteria Number	Description of Criteria	Weight of Criteria
1	Number of people per capita suffering from opioid use disorder in the participating subdivision, or in the absence of such information, the opioid prescription rate in the political subdivision compared to the national average opioid prescription rate	20%
2	Number of opioid overdose deaths in the participating political subdivision	40%
3	Amount of opioids distributed	40%

	within the participating political subdivision	
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[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24]

APPENDIX B. COUNTY TIERS [REVOKED]

[**Source:** Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

APPENDIX C. MUNICIPALITY TIERS [REVOKED]

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

APPENDIX D. COMMON EDUCATION SCHOOL DISTRICT TIERS [REVOKED]

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

APPENDIX E. TECHNOLOGY SCHOOL DISTRICT TIERS [REVOKED]

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

APPENDIX F. COLLABORATIVE MULTI-APPLICANT TIERS [REVOKED]

[**Source:** Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

APPENDIX G. SCORING RUBRIC [REVOKED]

[Source: Added at 41 Ok Reg, Number 13, effective 2-9-24 (emergency); Added at 41 Ok Reg, Number 21, effective 7-25-24; Revoked at 42 Ok Reg, Number 20, effective 7-11-25]

CHAPTER 55. STATE LONG-TERM CARE OMBUDSMAN PROGRAM

Editor's Note: *Effective 11-1-24, the rules in this Chapter were transferred from Chapter 105, Subchapter 11, in the Department of Human Service's Title 340 [OAC 340:105-11-230 through 340:105-11-255]. Pursuant to Senate Bill 1709 (2024), "all administrative rules promulgated by the Director of Human Services for the Office of the State Long-Term Care Ombudsman shall be transferred to and become a part of the administrative rules of the Office of the Attorney General" [Senate Bill 1709 (2024)].*

[Source: Codified 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 1. GENERAL PROVISIONS

75:55-1-1. Purpose

The purpose of this Chapter is to describe the rules pertaining to the Office of the State Long-Term Care Ombudsman.

[Source: Transferred from 340:105-11-230 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-2. Definitions

The following words and terms when used in this Subchapter shall have the following meaning unless the context clearly indicates otherwise:

"Assistant Secretary" means the Assistant Secretary for Aging; the administrative head of the Administration on Aging of the United States Department of Health and Human Services.

"Business day" means a consecutive eight-hour period of time when the Office of the State Long-Term Care Ombudsman (Office) is open for business.

"Confidential information" means all information that relates to specific individuals who live in long-term care facilities, complainants, and other informants including, but not limited to, names, identifying information, and all problem and complaint documentation.

"Deputy state long-term care ombudsman" or **"deputy ombudsman"** an individual employed by the Office to assist with management and operations and supervised by the State Long-Term Care Ombudsman (Ombudsman).

"Designated entity" means an agency, not-for profit business, or organization that the Ombudsman has designated in writing to host Office representatives.

"Designation" means the appointment of an agency, individual, or both, as the official Office representative.

"Immediate family" means a member of the household or a relative with whom there is a close personal or significant financial relationship.

"Leave of absence" means an ombudsman volunteer's excused absence from official duties not to exceed three months.

"Long-term care facility" means any nursing facility, specialized facility, residential care home, or assisted living center authorized under

title 63, sections 1-820, 1-890.2, and 1-1902 of the Oklahoma Statutes.

(A) **"Nursing facility"** means a home, establishment, or institution primarily engaged in providing:

- (i) skilled nursing care and related services for residents;
- (ii) rehabilitation services; or
- (iii) on a regular basis, health-related care and services to individuals who because of mental or physical conditions require care and services beyond the level of care provided by a residential care home under title 63, section 1-1902(9).

(B) **"Residential care home"** means any establishment or institution other than an adult companion home, group home, hotel, motel, fraternity or sorority house, or college or university dormitory that offers, provides, or supports residential accommodations, food service, and supportive assistance to any of its residents; or houses any resident requiring supportive assistance who is not related to the owner or administrator of the home by blood or marriage. The resident must be ambulatory and essentially capable of participating in his or her own activities of daily living, and not routinely requiring nursing services as described in title 63, section 1-820(12)(a).

(C) **"Specialized facility"** means any home, establishment, or institution that offers or provides inpatient long-term care services on a 24-hour basis to a limited category of persons requiring such services including, but not limited to, a facility providing health or habilitation services for persons who are living with intellectual or developmental disabilities as described in title 63, section 1-1902(11).

(D) **"Assisted living center"** means any home or establishment offering, coordinating, or providing services to two or more persons who:

- (i) are domiciled therein;
- (ii) are unrelated to the operator;
- (iii) by choice or because of functional impairments, need assistance with personal care or nursing supervision;
- (iv) may need intermittent or unscheduled nursing care;
- (v) may need medication assistance; and/or
- (vi) may need assistance with transfer, ambulation, or both as set forth under title 63, section 1-890.2(1).

"Long-term care ombudsman" means a person who receives and resolves complaints made by or on behalf of residents of long-term care facilities and is trained and designated as an official representative by the Office.

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

"Office of the State Long-Term Care Ombudsman" or "Office" means the office created within the Oklahoma Office of the Attorney General that carries out the Long-Term Care Ombudsman Program per the Older Americans Act of 1965, as amended, and per federal regulations under the auspices and general direction of the state long-term care ombudsman.

"OAA" means the Older Americans Act of 1965, including the original enactment (Pub. L. No. 89-73) and any subsequent amendments.

"Planning and Service Area" or "PSA" means a geographic area specified by Section 305(a)(1)(E) of the OAA, as amended for purposes of planning for and serving the needs of individuals 60 years of age and above.

"Representative" means the employee or volunteer designated by the Ombudsman to fulfill duties, whether personnel supervision is provided by the Ombudsman or designees or by an agency hosting a local ombudsman entity designated by the Ombudsman.

"Resident representative" means:

- (A) an individual chosen by the resident to act on his or her behalf in order to support the resident in decision-making; accessing the resident's:
 - (i) medical, social, or other personal information;
 - (ii) managing financial matters; or
 - (iii) receiving notifications;
- (B) a person authorized by state or federal law including, but not limited to, agents under power of attorney, representative payees, and other fiduciaries to act on the resident's behalf in order to support him or her in:
 - (i) decision-making;
 - (ii) accessing the resident's medical, social, or other personal information; and/or
 - (iii) managing financial matters; or receiving notifications;
- (C) a legal representative as used in Section 712 of the OAA; or
- (D) the resident's court-appointed guardian or conservator. This definition is not intended to expand the authority of any resident representative beyond that specifically authorized by the resident, state or federal law, or a court of competent jurisdiction.

"State long-term care ombudsman" or "Ombudsman" means the individual who heads the Office and is personally responsible or responsible through Office representatives to fulfill the functions, responsibilities, and duties.

"State Long-Term Care Ombudsman Program" or "Program" means the program carried out and consisting of the Ombudsman, Office, and Office representatives.

"Willful interference" means actions or inactions taken by an individual or entity attempting to intentionally prevent, interfere with, or impede the Ombudsman or an Office representative from performing any program functions or responsibilities federal or state law.

[Source: Transferred from 340:105-11-231 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-3. Office of the State Long-Term Care Ombudsman responsibilities

(a) The Office establishes and operates a statewide Long-Term Care Ombudsman Program consistent with the Older Americans Act and Oklahoma Long-Term Care Ombudsman Act requirements. OAG provides monitoring including, but not limited to, fiscal monitoring where the Office and/or local ombudsman entity is organizationally located within, under contract, or by other arrangement. OAG monitors and ensures the State Long-Term Care Ombudsman is the head of a unified statewide ombudsman program. With OAG assistance, the Office:

- (1) identifies, investigates, and resolves complaints made by, or on behalf of, residents of long-term care facilities that relate to action, inaction, or decisions of providers, or long-term care services provider representatives, public agencies, or health and social services agencies that may adversely affect the health, safety, welfare, or residents' rights including the welfare and rights of residents with respect to the appointment and activities of guardians and representative payees;
- (2) informs residents about obtaining services provided by the Program;
- (3) ensures residents have regular and timely access to the services provided through the Program;
- (4) ensures residents and complainants receive timely responses from Office representatives on information and complaint requests;
- (5) represents residents' interests before governmental agencies;
- (6) ensures individual residents have access to and can pursue, as the Ombudsman determines necessary and consistent with resident interests, administrative, legal, and other remedies to protect the resident's health, safety, and welfare;
- (7) provides administrative and technical assistance to Office representatives and agencies hosting local ombudsman entities;
- (8) analyzes, comments on, and monitors the development and implementation of federal, state, and local laws, regulations, and other governmental policies and actions that pertain to the health, safety, welfare, and resident's rights with respect to long-term care facilities and services in the state. The Office:
 - (A) recommends changes in such laws, regulations, policies, and actions as appropriate;
 - (B) facilitates public comment on the laws, regulations, policies, and actions; and
 - (C) provides leadership to statewide systems advocacy efforts on behalf of long-term care facility residents including coordination of systems advocacy efforts carried out by Office representatives;
- (9) provides information to public and private agencies, legislators, the media, and others, as deemed necessary by the

Office, regarding the problems and concerns of individuals residing in long-term care facilities including recommendations related to such. Such determinations and positions are those of the Office and do not necessarily represent OAG determinations or positions;

(10) when carrying out systems advocacy efforts on behalf of long-term care facility residents and pursuant to the receipt of grant funds under the Older Americans Act, the provision of information, recommendations of changes in law to legislators, and recommendations of changes in regulations and policies to government agencies by the Ombudsman or Office representatives does not constitute lobbying activities per Part 93 of Title 45 of the Code of Federal Regulations;

(11) coordinates with and promotes the development of citizen organizations consistent with the residents' interests;

(12) promotes and provides technical support for the development of ongoing support requested by residents and family councils to protect the residents' well-being and rights;

(13) provides training for staff and volunteers and promotes the development of citizen organizations to participate in the Program;

(14) carries out other activities consistent with the requirements of this Part the Assistant Secretary for Aging determines appropriate;

(15) establishes procedures for appropriate access by the Ombudsman and designated representatives to long-term care facilities, appropriate private access to residents, and appropriate access to residents' personal and medical records;

(16) establishes procedures to protect the confidentiality of records and ensures that the identity of any resident or complainant is not disclosed without the resident's or complainant's consent, or upon court order;

(17) establishes a statewide uniform reporting system to collect and analyze information on complaints and conditions in long-term care facilities for the purpose of identifying and resolving significant problems. The Ombudsman must submit this information to the state agency responsible for licensing or certifying long-term care facilities and to the Assistant Secretary for Aging in the manner prescribed;

(18) independently develops and provides final approval of an annual report describing the activities carried out by the Office in the year for which the report is prepared. The annual report:

(A) contains data and findings regarding the types of problems experienced and complaints made by or on behalf of individuals residing in long-term care facilities;

(B) provides policy, regulatory, and legislative recommendations to solve problems and complaints, to improve the quality of care and life in long-term care facilities;

(C) includes analysis of the Program's success and success in providing services to residents of long-term care

facilities;

(D) describes barriers that prevent optimal Program operation;

(E) is available to the public and is submitted to:

(i) the Assistant Secretary for Aging;

(ii) the state chief executive officer;

(iii) the state legislature;

(iv) the state agency responsible for licensing or certifying long-term care facilities; and

(v) other appropriate governmental entities;

(19) ensures that no officer, employee, or designated representative is subject to a conflict of interest; and

(20) plans and operates the Program, considering the stakeholders' views.

(b) OAG ensures:

(1) the Office is a distinct entity, separately identifiable, and located within or connected to OAG;

(2) the Ombudsman serves on a full-time basis. Title 75, chapter 55 of the Oklahoma Administrative Code includes the entirety of the ombudsman's work that provides Office leadership and management, functions, responsibilities, and duties;

(3) the Office and its representatives are not required or requested to be responsible for leading, managing, or performing the work of non-ombudsman services or programs except on a time-limited, intermittent basis;

(4) individuals involved in the designation of the Ombudsman, by appointment or otherwise, or the designation of the head of any subdivision of the Office are not subject to conflicts of interest;

(5) mechanisms are in place to identify and remedy any conflicts, such as conflicts of interest;

(6) adequate legal counsel, free from conflict of interest is available to the Office for advice and consultation. legal representation is provided to Office representatives against whom suit or other legal action is brought in connection with the performance of such representative's official duties;

(7) the Office has the ability to pursue administrative, legal, and other appropriate remedies on behalf of long-term care facility residents;

(8) the Ombudsman meets minimum qualifications that include, but are not limited to, demonstrated expertise in:

(A) long-term services and supports or other direct

services for older persons or individuals with disabilities;

(B) consumer-oriented public policy advocacy;

(C) leadership and program management skills; and

(D) negotiation and problem resolution skills;

(9) the Ombudsman has authority to recommend policies and procedures. OAG policies and practices do not prohibit the Ombudsman from performing functions and responsibilities per federal law and rules;

(10) entities hosting a local ombudsman must not have personnel policies or practices that prohibit Office representatives from

performing Program duties or from adhering to federal or state laws and rules;

- (11) the Ombudsman monitors the performance of local entities designated to carry out Program duties;
- (12) processes are in place by which the agencies hosting local ombudsman entities coordinate with the Ombudsman in the employment or appointment of Office representatives;
- (13) standards are in place to prioritize abuse, neglect, exploitation, and time-sensitive complaints and consider the severity of the risk to the resident, the imminence of the threat of harm to the resident, and the opportunity for mitigating harm to the resident through Program services; and
- (14) procedures are in place clarifying appropriate fiscal responsibilities of the local ombudsman entity including, but not limited to, clarifications regarding access to programmatic fiscal information by appropriate Office representatives.

[Source: Transferred from 340:105-11-232 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-4. Office of the State Long-Term Care Ombudsman policies and procedures

As required by the OAA, the Office of the State Long-Term Care Ombudsman is established within the OAG to carry out a statewide Long-Term Care Ombudsman Program (Program) under OAG direct supervision and administration.

- (1) Office consists of the State Long-Term Care Ombudsman (Ombudsman) and program and support staff.
- (2) Specific staffing requirements for each area Program are in accordance with OAG administrative and funding procedures.
- (3) The area entity designated to provide ombudsman services must provide an adequate allocation of funds to operate the local program. Costs incurred include, but are not limited to:
 - (A) reimbursement of ombudsman supervisors' and ombudsman volunteers' travel costs, including travel to and from assigned facilities and required meetings;
 - (B) identification badges; and
 - (C) incidental costs related to trainings and meetings including awards and certificates.
- (4) Designated area ombudsman staff representatives are organizationally-located within public or non-profit private entities.
- (5) Selection of area ombudsman staff representatives is made by the director of the designated area ombudsman entity, with input and recommendations from state Ombudsman staff during the interview process, and subject to Ombudsman approval.
 - (A) For the purpose of review of qualifications, criminal background checks, and conflict of interest issues, the Office has access to applications, resumes, and other personnel information related to applicants and incumbents in area ombudsman staff positions.

(B) State Ombudsman staff is involved at the Ombudsman's discretion in applicant interviews for area ombudsman staff positions as members of an interviewing team. Upon conclusion of the interview process, there is opportunity for discussion and recommendations.

(C) Employment of area ombudsman staff is probationary pending the individual's satisfactory training completion.

(6) The Ombudsman investigates allegations of misconduct by Office representatives in the performance of Program duties and, as applicable, coordinates investigations with OAG, the agency hosting the local ombudsman entity, and/or the local ombudsman entity.

(7) The Ombudsman determines the use of the fiscal resources appropriated or otherwise available to operate the Office. The Ombudsman approves the allocations of federal and state funds provided to such entities, subject to applicable federal and state laws and policies. The Ombudsman determines Program budgets and expenditures and those local ombudsman entities are compliant with laws, policies, and procedures governing the Program.

[Source: Transferred from 340:105-11-233 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-5. Grievance process

Title 42, section 1324.11 of the Code of Federal Regulations establishes a grievance process for the receipt and review of grievances regarding the determinations or actions of the State Long-Term Care Ombudsman (Ombudsman) and Office representatives.

(1) Long-term care residents or legal representatives of residents who lack capacity to provide informed consent may ask the Ombudsman to review and reconsider complaint findings of designated representatives by submitting a request in writing or verbally to the Ombudsman or deputy ombudsman within 30-calendar days of the completion of an investigation. The Ombudsman or deputy ombudsman:

- (A) completes a record review within 30-calendar days of the formal request;
- (B) determines if the representative followed complaint processes;
- (C) places notation in the case record of his or her findings, initiates any needed action for resolution, and completes any warranted changes to the case documentation; and
- (D) provides a copy of the findings to the resident or the resident's legal representative.

(2) When any grievance is related to the refusal or withdraw of designation by the ombudsman entity or staff representative, the resident or the resident's legal representative has a right to request a hearing within 10-calendar days of the written notice.

[Source: Transferred from 340:105-11-233.1 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-6. Records, confidentiality, and disclosure

The Office manages Program files, records, and information, in physical, electronic, or other formats including information maintained by Office representatives and local ombudsman entities pertaining to Program cases and activities. Such files, records, and information are the property of the Office. Office and area ombudsman staff, ombudsman volunteers, and designated agencies uphold policies listed in this Section.

(1) No complaint, other confidential information, or records maintained by the Program may be disclosed unless the State Long-Term Care Ombudsman authorizes the disclosure.

(2) The Ombudsman or ombudsman representative does not disclose the identity of any complainant or resident unless the complainant or resident, or his or her legal representative consents:

- (A) in writing to the disclosure and specifies to whom the identity may be disclosed;
- (B) verbally and the Ombudsman documents the consent at the time consent is given; or through the use of auxiliary aids and services communication of informed consent may be made:

- (i) in writing; or
- (ii) verbally or visually; and
- (iii) such consent must be documented contemporaneously by the Ombudsman or Office representative; or

(C) a court orders the disclosure.

(3) In accordance with federal law and regulation, the Ombudsman and Office representatives do not report suspected abuse, neglect, or exploitation of a resident when a resident has not communicated informed consent to such report. Except the Ombudsman or Office representative may refer confidential information and disclose resident-identifying information to the appropriate agency or agencies for regulatory oversight; protective services; access to administrative, legal, or other remedies; and/or law enforcement action when the circumstances in (4) of this Section are met.

(4) When a resident is unable to communicate his or her informed consent to the Ombudsman or Office representative, the Office may rely on the resident's designated representative's consent, so long as the Ombudsman or Office representative does not have reasonable cause to believe the resident representative is not acting in the resident's best interests or is the alleged perpetrator of the abuse, neglect, or exploitation.

(5) Inspection dates provided to the Program at any level, including Oklahoma State Department of Health inspections, are confidential per Section 1395i-3(g)(5)(B) of Title 42 of the United States Code (U.S.C.).

(A) Inspection dates and dates of other unannounced visits to facilities, including visits for the purpose of complaint investigation, are not posted or otherwise revealed.

(B) Federal law provides for a \$2,000 penalty for release of inspection dates per 42 U. S. C. § 1395i-3(g)(2) (A) (1) and Section 488.307 of Title 42 of the Code of Federal Regulations.

(6) Privacy is provided for complaint receipts by mail, phone, or personal interview to maintain confidentiality.

(7) All mail addressed to an ombudsman by name or title is delivered to the ombudsman unopened.

(8) Locked files are used to maintain confidential records. Access to such files is limited to designated area ombudsman representatives and Office staff.

[Source: Transferred from 340:105-11-243 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-7. Liability and legal counsel

The OAA and title 63, section 1-2214 of the Oklahoma Statutes provide protections for designated representatives of the Office.

(1) For purposes of the Governmental Tort Claims Act, any state, area, or local volunteer long-term care ombudsman is deemed to be an employee of this state and not personally liable for any act

or omission made within the scope of employment, as such term is defined by the Governmental Tort Claims Act.

(2) OAG ensures that adequate legal counsel is available to the Office for advice and consultation.

(3) Legal representation is provided to any representative of the Office against whom suit or other legal action is brought in connection with any act or omission of a representative made within the scope of employment.

(4) Any representative of the Office who wishes to request legal advice, consultation, or representation contacts the Office.

[Source: Transferred from 340:105-11-246 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-1-8. Other policies

(a) The rules in this Chapter reflect compliance with OAA requirements under authority of state statute.

(b) Any complaint alleging willful interference or retaliation or reprisal received by the Office shall be referred to the appropriate law enforcement entity, after consultation with legal counsel.

[Source: Transferred from 340:105-11-247 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

SUBCHAPTER 2. COMPLAINTS

75:55-2-1. Complaint investigation

The Program complaint mechanism functions at all levels with procedures for receipt, investigation, and resolution of problems and complaints.

(1) The Office staff:

(A) receive complaints from all sources, including referrals from enforcement agencies and complaints from area ombudsman programs;

(B) refer complaints to area ombudsman supervisors when appropriate;

(C) investigate complaints directly or with ombudsman supervisors;

(D) refer unresolved formal complaints to a regulatory or law enforcement agency, when appropriate;

(E) assist other agencies in complaint resolution;

(F) follow-up on complaint resolution and closure; and

(G) may decline to investigate any complaint when:

(i) the complaint is frivolous or not made in good faith;

(ii) the complaint was made so long after the incident that it is no longer reasonable to conduct an investigation;

- (iii) an adequate investigation cannot be conducted because of insufficient funds, insufficient staff, lack of staff expertise, or any other reasonable factor that would result in an inadequate investigation despite a good faith effort; or
- (iv) an investigation by the Office would create a real or apparent conflict of interest.

(2) Area ombudsman supervisors:

- (A) receive complaints from all sources;
- (B) investigate complaints through on-site, unannounced visits to the facility or refer the complaints to ombudsman volunteers;
- (C) resolve complaints or refer the complaint in writing to Ombudsman staff when correction cannot be achieved at the area level, or when a regulatory or law enforcement agency's assistance is needed; and
- (D) follow-up on conditions identified through the complaint process.

(3) Ombudsman volunteers:

- (A) receive complaints and learn of problems from all sources;
- (B) investigate complaints through on-site, unannounced, routine weekly visitation to the assigned facility or refer complaints to an ombudsman supervisor for investigation;
- (C) resolve problems or complaints within the facility or refer to an ombudsman supervisor for resolution; and
- (D) follow-up on conditions through routine, weekly visitation with residents in the assigned facility.

[Source: Transferred from 340:105-11-237 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-2-2. Complaint processing

(a) Regardless of the source of the complaint the Office, State Long-Term Care Ombudsman, and Office representatives serve long-term care facility residents to identify, investigate, and resolve complaints. The Ombudsman or Office representative investigates complaints including, but not limited to, abuse, neglect, or exploitation for the purposes of resolving the complaint to the resident's satisfaction and to protect the resident's health, safety, welfare, and rights. The Ombudsman or Office representative may identify, investigate, and resolve a complaint impacting multiple or all facility residents.

(b) Regardless of the source of the complaint, including when the source is the Ombudsman or Office representative, the Ombudsman or Office representative must support and maximize resident participation in the complaint resolution process.

- (1) The Ombudsman or Office representative must offer the resident privacy for confidentially purposes, when providing information and hearing, investigating, and resolving complaints.
- (2) The Ombudsman or Office representative must discuss the complaint with the resident and resident representative when the

resident is unable to communicate informed consent, to:

- (A) determine his or her perspective;
- (B) request informed consent to investigate the complaint;
- (C) determine the resident's or his or her representative's perspective on complaint resolution including if the allegations are reported and, when so, if the Ombudsman or Office representative releases resident identifying information or other relevant information to the facility and/or appropriate agencies. Such report and disclosure is consistent with (b)(3) of this Section;
- (D) advise the resident and resident representative of the resident's rights, when applicable;
- (E) work with the resident or resident representative to develop a plan of action to resolve the complaint, when applicable;
- (F) investigate the complaint to determine if the complaint can be verified; and
- (G) determine if the complaint is resolved to the resident's or resident representative's satisfaction.

(3) When the resident is unable to communicate and does not have a representative to provide informed consent the Ombudsman or Office representative:

- (A) takes appropriate steps to investigate and works to resolve the complaint in order to protect the resident's health, safety, welfare, and rights; and
- (B) determines if the complaint was resolved to the complainant's satisfaction.

(4) To determine whether to rely on a resident representative to communicate or make determinations on the resident's behalf for complaint processing, the Ombudsman or Office representative ascertains the extent of the authority granted to the resident's representative under court order, by power of attorney, or other document the resident used to grant authority to the representative.

(c) The Ombudsman or Office representative may provide information regarding the complaint to another agency in order to substantiate the facts for regulatory, protective services, law enforcement, or other purposes so long as the Ombudsman or Office representative adheres to the disclosure requirements provided by law. When the resident or resident representative:

- (1) seeks regulatory, protective services, or law enforcement action and the Ombudsman or Office representative determines the resident or resident representative communicated informed consent to the Office, the Office assists the resident or resident's representative contact the appropriate agency and/or discloses the resident or resident's representative consent for such purposes; and
- (2) is served by disclosing information to a facility representative or referrals to an entity other than those referenced in (c)(1) of this Section and the Ombudsman or Office representative determines the resident or resident representative communicated

informed consent to the Program, the Ombudsman or Office representative may:

- (A) assist the resident or resident representative contact the appropriate facility representative or the entity;
- (B) provide information on how a resident or representative may obtain a facility or entity contact information; and/or
- (C) disclose the information the resident or resident's representative provided consent for to an appropriate facility representative or entity, consistent with Ombudsman Program procedures.

[Source: Transferred from 340:105-11-237.1 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-2-3. Complaint investigation timeframes

(a) All complaints investigated by a designated ombudsman require a face-to-face visit with the resident the complaint involves. The time frames for the initial attempt at a face-to-face visit must occur within five business days of the receipt of the complaint unless:

- (1) the complaint includes an allegation of abuse, neglect, or exploitation; then the time frame for initial face-to-face contact with resident occurs within three business days; or
- (2) the complaint involves an actual or threatened discharge from a facility, the time frame for initial face-to-face contact with resident is no later than the last day the resident has a right to appeal the discharge or within five business days, whichever comes first.

(b) There is no time frame for the determination of the final disposition of a complaint but it is determined when the ombudsman has enough evidence to complete the investigation. In the event the final disposition of a complaint exceeds 90 days, the Ombudsman representative assigned to investigate the complaint submits the case to the Ombudsman or Deputy Ombudsman for review and the reason the case will remain open is documented in the case record.

(c) In rare instances weather, illness, or other unforeseen, serious circumstances may delay on-site investigation. When a delay occurs, the ombudsman representative consults with and seeks consent from the State Long-Term Care Ombudsman or deputy ombudsman to:

- (1) initiate a phone response.
 - (A) Contact with the resident and/or the complainant is attempted.
 - (B) Resolution of the complaint may be sought, in accordance with the resident's wishes, through phone calls to persons that may be able to resolve or mitigate the situation, such as the facility administrator, facility staff, or another agency;
- (2) complete comprehensive documentation regarding the cause(s) for delay and the response to the complaint in:
 - (A) hard copy case notes, when used;

- (B) electronic documentation, such as a journal entry titled, "Delayed Response" documenting the:
 - (i) follow-up date;
 - (ii) delaying factor(s); and
 - (iii) steps taken to resolve the complaint;
- (3) an on-site visit follow-up with the resident is required even when the complaint was resolved by phone. The follow-up visit occurs immediately following the unforeseen circumstance; and
- (4) complete the follow-up visit with comprehensive documentation in:
 - (A) hard copy case notes, when used; or
 - (B) electronic documentation, such as a journal entry titled, "Delayed Response" documenting the:
 - (i) follow-up date;
 - (ii) any remaining issues or additional complaints to be resolved; and
 - (iii) resident's satisfaction with the resolution.

[Source: Transferred from 340:105-11-237.2 by SB 1709 (2024), eff 11-1-24]

SUBCHAPTER 3. CONFLICTS OF INTEREST

75:55-3-1. Conflict of interest

- (a) An officer, employee, volunteer, or other representative of the Office may not be subject to a conflict of interest that has the potential to impair his or her official duties in an impartial manner and may not stand to gain financially through an action or potential action brought on behalf of persons the Program serves.
- (b) A conflict of interest exists when any organizational or supervisory relationship, policy, action, or individual ombudsman's personal relationship, immediate familial relationship, or action conflicts with or impairs his or her responsibilities to investigate, resolve, or refer complaints or otherwise advocate for long-term care facility residents.
- (c) No persons involved in the designation of the State Long-Term Care Ombudsman, by appointment or otherwise, or the designation of the head of any designated entity may be subject to a conflict of interest.
- (d) Freedom from conflict of interest is established through interview of prospective Ombudsman staff and volunteers and through a signed statement in a form prescribed by the Office and other appropriate means.
- (e) Persons listed in this paragraph must complete and sign a form developed by OAG and the Office that includes a conflict of interest statement and ethical guidelines, annually and when there is any change of facility or area assignment by:
 - (1) prospective and current Office staff;
 - (2) prospective and current ombudsman volunteers; and
 - (3) any other person involved in the direct operation of the Program.

(f) Agencies must annually review a form developed by OAG and the Office that contains freedom from conflict of interest assurances, which must be signed annually by:

- (1) directors of designated entities or those seeking designation as local ombudsman entities; and
- (2) directors of sponsoring agencies.

[Source: Transferred from 340:105-11-235 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-3-2. Organizational conflict of interest

(a) OAG and the Office consider the organizational conflicts that may impact the effectiveness and credibility of the work of the Office.

Organizational conflicts of interest include, but are not limited to, placement of the Office or requiring that an Ombudsman or Office representative perform conflicting activities in an organization that:

- (1) is responsible for licensing, surveying, or certifying long-term care facilities;
- (2) is an association or an affiliate of such an association, of long-term care facilities or of any other residential facilities for older individuals or individuals with disabilities;
- (3) has ownership or investment interest, represented by equity, debt, or other financial relationship in, or receives grants or donations from, a long-term care facility;
- (4) has governing board members with any ownership, investment, or employment interest in long-term care facilities;
- (5) provides long-term care to residents of long-term care facilities including the provision of personnel for long-term care facilities or the operation of programs that control access to or services for long-term care facilities;
- (6) provides long-term care coordination or case management for residents of long-term care facilities;
- (7) sets reimbursement rates for long-term care facilities;
- (8) provides adult protective services;
- (9) is responsible for eligibility determinations for residents of long-term care facilities regarding Medicaid or other public benefits;
- (10) conducts preadmission screening for long-term care facility placements;
- (11) makes admission or discharge decisions for individuals to or from long-term care facilities; or
- (12) provides guardianship, conservatorship, or other fiduciary or surrogate decision-making services for residents of long-term care facilities.

(b) **Removing or remedying organizational conflicts.** OAG and the Ombudsman identify and take steps to remove or remedy conflicts of interest between the Office and OAG or another entity carrying out the Program.

- (1) The Ombudsman identifies organizational conflicts of interest in the Program and describes steps taken to remove or remedy conflicts within the annual report submitted to the Assistant

Secretary for Aging through the National Ombudsman Reporting System.

(2) When the Office is located within or otherwise organizationally-connected to OAG, OAG:

(A) takes reasonable steps to avoid internal conflicts of interest;

(B) reviews and identify internal conflicts;

(C) takes steps to remove or remedy conflicts;

(D) ensures that no individual, or member of the immediate family of an individual, involved in the designating, appointing, otherwise selecting or terminating the Ombudsman is subject to a conflict of interest; and

(E) ensures the Ombudsman disclosed such conflicts and described steps taken to remove or remedy conflicts within the annual report submitted to the Assistant Secretary for Aging through the National Ombudsman Reporting System.

(3) When OAG is unable to adequately remove or remedy a conflict, the Program is carried out by contract or other arrangement with a public agency or nonprofit private organization as required by the OAA.

(4) DHS may not enter into a contract or other arrangement to carry out the Program or operate the Office when the other entity:

(A) is responsible for licensing, surveying, or certifying long-term care facilities;

(B) is an association or an affiliate of such an association of long-term care facilities, or of any other residential facilities for older individuals or individuals with disabilities; or

(C) has any ownership, operational, or investment interest, represented by equity, debt, or other financial relationship in a long-term care facility.

[Source: Transferred from 340:105-11-235.1 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-3-3. Conflict of interest remedies

(a) **Volunteers.** When a conflict of interest is identified before designation, the volunteer is not certified in any facility in which the conflict of interest could be expected to affect performance. When a conflict of interest or potential conflict of interest involving a certified volunteer is identified, the ombudsman supervisor promptly notifies the Office to recommend withdrawal of designation, reassignment of the volunteer, or other appropriate action.

(b) **Paid ombudsman representatives.** No applicant for a paid ombudsman position, at any level of the program, is selected to fill that position when a conflict of interest is identified during any stage of the application or hiring process. When a conflict of interest or potential conflict of interest is identified involving a designated representative, action must be taken to remedy the conflict within 30-calendar days.

Remedies may range from elimination of the conflict to withdrawal of the individual's designation.

(c) **Directors of sponsoring agencies and designated entities.** When a conflict of interest or potential conflict of interest is identified action must be taken to remedy the conflict of interest within 30-calendar days. Remedies may include:

- (1) removal or resolution of the conflict of interest;
- (2) withdrawal of the agency's designation as an area ombudsman entity;
- (3) withdrawal of designation of the agency as an Area Agency on Aging; or
- (4) other reasonable action.

[Source: Transferred from 340:105-11-236 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-3-4. Conflict of interest statement and ethical guidelines

(a) The OAA requires assurances that there are no conflicts of interest within the Program. Mechanisms to identify and remedy any conflicts are mandated. Office staff and volunteers must study the rules in this section and sign a form developed by OAG and the Office about containing a conflict of interest statement and ethical guidelines to certify that they can provide assurances and meet ethical guidelines.

(b) The assurances and ethical guidelines include, but are not limited to, the following:

- (1) the designated ombudsman and any member of the ombudsman's immediate family may not own, operate, control, or have interest, voting rights, or outstanding indebtedness to or be employed by any company or facility or person investigated by the ombudsman;
- (2) the designated ombudsman may not solicit or accept from any person or organization, directly or indirectly, money or anything of value if it could reasonably be expected to influence the ombudsman's official actions or judgment or could reasonably be considered a reward for any official action or omission on the part of the ombudsman;
- (3) the designated ombudsman who is assigned or acts as an official representative of a designated entity in the presentation of papers, talks, demonstrations, or making appearances does not solicit or accept fees, honoraria, or reimbursement of expenses for personal gain. Any fees or honoraria offered in connection with these activities are paid to the designated entity;
- (4) the designated ombudsman is alert to anything that impairs ability to objectively investigate complaints. The ombudsman avoids conflict of interest in the establishment of personal relationships that affect impartiality on the job;
- (5) the designated ombudsman may be involved in serving as an officer or board member of a social, fraternal, or religious organization for which the ombudsman receives no compensation or anything of value, provided the organization is not affected by exercise of the ombudsman's discretion;

- (6) the designated ombudsman may not use or disclose information gained in the course of, or by reason of, the ombudsman's official position or activities in any way without the express consent of the resident or complainant;
- (7) the designated ombudsman discloses all past and current appointments, involvement, membership, or interest that affect or could reasonably be expected to affect the ombudsman's ability to investigate and resolve complaints in an objective and independent manner;
- (8) the designated ombudsman may not effectively recommend or decide to hire or promote another person who is a member of the ombudsman's immediate family;
- (9) the designated ombudsman may not give preferential or favorable treatment in provision of service to a resident who is a member of the ombudsman's family;
- (10) the designated ombudsman may not serve as guardian, conservator, or in another fiduciary or surrogate decision-making capacity for a resident of a long-term care facility where he or she is assigned or investigates complaints;
- (11) the designated ombudsman may not be assigned, investigate complaints, or serve residents of a facility in where his or her immediate family member resides; and
- (12) the designated ombudsman may not conduct business in restaurants or other public places where a public observer might reasonably conclude that confidences could be breached due to lack of privacy.

(b) OAG or a local ombudsman entity shall not appoint or employ an individual, nor will the Ombudsman designate an individual as an Office representative who:

- (1) has direct involvement in the licensing or certification of a long-term care facility;
- (2) has an ownership or investment interest represented by equity, debt, or other financial relationship in a long-term care facility. Divestment within a reasonable period may be considered an adequate remedy to this conflict;
- (3) receives, directly or indirectly, remuneration in cash or in kind under a compensation arrangement with an owner or operator of a long-term care facility; or
- (4) is employed by or participating in the management of a long-term care facility.

(c) Any entity that appoints or employs Office representatives make efforts to avoid appointing or employing an individual as an Office representative who was employed by or participating in the management of a long-term care facility within the previous twelve months. Where such an individual is appointed or employed, steps are taken to remedy the conflict.

(d) OAG and the Office shall develop and maintain a form containing a conflict of interest statement and ethical guidelines.

75:55-3-5. Freedom from conflict of interest assurances

(a) The OAA requires assurances of freedom from conflict of interest for the officially designated area program as a subdivision of the Office. Directors of designated area ombudsman entities and sponsoring agency directors are asked to read, review with staff and sponsors, and sign a form developed by OAG and the Office certifying the assurances described in subsections b and c.

(b) Directors of designated area ombudsman entities and sponsoring agency directors shall assure that the agency is—

- (1) is not a part of an entity responsible for licensing or certifying long-term care facilities, or part of a provider organization;
- (2) does not hold interest in, manage, own, or contract with a long-term care facility;
- (3) does not stand to gain financially through an action or potential action brought on behalf of persons the ombudsman serves; and
- (4) is not located within an organization that may impair or inhibit the ability of the ombudsman to objectively and independently investigate and resolve complaints.

(c) Directors of designated area ombudsman entities and sponsoring agency directors shall assure that the ombudsman will be free to:

- (1) take action on behalf of residents;
- (2) publicly represent the concerns of residents;
- (3) bring together persons who have the authority to solve problems;
- (4) make recommendations to boards, committees, and task forces in developing long-term care policy, or similar situations;
- (5) forward unresolved formal complaints to the Office according to program policy; and
- (6) publicize the State Long-Term Care Ombudsman Program and issues affecting older persons who are institutionalized.

(d) There are inherent conflicts in the role of the ombudsman. The agency supports the role and goals of the Program and the ombudsman staff through any conflict associated with their official duties.

(e) OAG and the Office shall develop and maintain a form for designated area ombudsman entities and sponsoring agency directors to make any assurances required by law.

[Source: Transferred from 340:105-11-253 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

**SUBCHAPTER 4. OPERATIONAL DUTIES AND
RESPONSIBILITIES OF THE OFFICE OF THE LONG-
TERM CARE OMBUDSMAN AND AREA AGENCIES ON
AGING**

75:55-4-1. Access

(a) **Access to facilities and residents.** The Office procedures for access to long-term care facilities and facility residents are in title 63, sections 1-829(F), 1-1902(2), 1-1919, and 1-2213(D) of the Oklahoma Statutes. An Office or local ombudsman is authorized to enter any facility licensed under the Oklahoma Nursing Home Care Act, the Oklahoma Residential Care Act, and the Continuum of Care and Assisted Living Act to communicate privately and without unreasonable restriction with any resident who consents to the communication, to seek consent to communicate, and to observe all areas of the facility that directly pertain to the care of the resident, without infringing upon the privacy of other residents without their consent.

(1) Area ombudsman staff and trained, designated ombudsman volunteers have the same right of access to licensed long-term care facilities and residents as Office staff.

(2) Any ombudsman staff or volunteer asked to leave the premises of any licensed facility for any reason does so and immediately reports the incident to the Office.

(b) **Access to resident records.** The Ombudsman and Office staff have access to:

(1) review the resident's medical and social records when the:

(A) Office representative has the resident's or the resident's legal representative's permission; or

(B) resident is unable to consent to the review, has no legal representative, and the Office representative obtains Ombudsman approval;

(2) the records as necessary to investigate a complaint when:

(A) a resident's legal guardian refuses to give permission;

(B) an Office representative has reasonable cause to believe the guardian is not acting in the resident's best interests; and

(C) the representative obtains Ombudsman approval;

(3) the administrative records, policies, and documents of long-term care facilities, to which the residents or the general public have access; and

(4) copies of all licensing and certification records maintained by the Oklahoma State Department of Health or any state agency with respect to long-term care facilities. Ombudsman volunteers must obtain a resident's legal representative's, ombudsman supervisor's, Ombudsman's, or deputy ombudsman's consent before accessing medical or social records of a resident who does not have the capacity to grant informed consent.

(5) The Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule does not preclude release by covered entities of resident private health information or other resident identifying information to the State Long-Term Care Ombudsman Program including, but not limited to, residents' medical, social, or other records, a list of resident names and room numbers, or information collected in the course of a federal or state survey or inspection process.

[Source: Transferred from 340:105-11-242 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-2. Facility visitation

(a) Designated area entity ombudsman staff makes periodic visits to all long-term care facilities in the area covered by the designated area ombudsman entity to ensure Program services are available to the residents.

(1) Residents of each facility are visited a minimum of four times each fiscal year.

(A) Visits made by appointment including in-service training for facility staff, are not counted toward the ombudsman staff's four visits per year.

(B) When the ombudsman visits residents as a citizen observer during State Department of Health inspections, the visit may be counted.

(C) Visits made to resolve complaints are counted when multiple residents are visited.

(2) Visits are documented on Office-approved forms and are protected according to Program confidentiality requirements.

Visits are:

(A) unannounced and dates are kept confidential; and

(B) not posted or revealed to any person other than the Area Agency on Aging director, designated as the area ombudsman entity who safeguards them.

(3) Ombudsman staff:

(A) accompanies each newly-designated ombudsman volunteer to the volunteer's assigned facility, by appointment, for an introductory visit to:

(i) introduce the volunteer to the facility administrator, residents, and facility; and

(ii) explain or clarify the ombudsman volunteer role;

(B) conducts at least one supervisory visit with each designated ombudsman volunteer at his or her assigned facility annually to:

(i) assess skills, relationships, and understanding of appropriate role; and/or

(ii) assist the volunteer with a complaint or other problem; and

(C) offers and conducts in-service training for staff of long-term care facilities on residents' rights, elder abuse prevention, and other topics of importance to residents.

(b) The designated ombudsman volunteer visits residents in his or her assigned facility, at least two hours per week to assist residents resolve or prevent problems or complaints. Each visit is documented.

(1) Volunteers may not officially begin visitation and other duties in a facility as a designated ombudsman volunteer until he or she:

(A) receives written notice of designation from the Office; and

- (B) is accompanied by Office staff on an introductory visit to the assigned facility.
 - (2) A volunteer who is temporarily unable to fulfill visitation or other program responsibilities may request or be placed on leave of absence. As defined in this Part, leave of absence may be granted due to:
 - (A) illness or family illness;
 - (B) vacation or extended travel; or
 - (C) a reason approved by the ombudsman supervisor.
 - (3) Leave of absence must not exceed three months duration. When the volunteer is unable to resume official duties by the end of the three-month period, the area supervisor notifies the Office and the volunteer's designation is withdrawn.
 - (4) The volunteer may request voluntary designation withdrawal from the Program at any time and be designated again when requirements are met.
 - (5) A volunteer that returns to service within one year of withdrawal of designation is not required to complete the initial two-day volunteer training but must be screened for potential conflicts of interests and complete the OSDH National Fingerprint Background Check.
- (c) Ombudsman participation as a citizen observer in unannounced inspections by the State Department of Health is allowed by the Oklahoma Nursing Home Care Act, the Oklahoma Residential Care Act, and the Federal Nursing Home Reform Act.
- (1) Office staff and designated ombudsman volunteers may participate.
 - (2) Inspection schedule information is kept in a locked file and access is restricted to Office staff.
 - (3) The location of the inspection is shared by Office staff only with the area ombudsman supervisor.
 - (4) The ombudsman facility volunteer may be notified, but notification is made no earlier than the inspection date.
 - (5) Early notification to a facility is strictly prohibited and potentially subject to civil penalty authorized under federal law.
- (d) When entering a facility for a visit, Office staff and volunteers notify the administrator or other charge person of their presence. If a charge person is not located, any staff person may be notified. This requirement is not intended to delay an ombudsman from proceeding promptly with a complaint investigation or resident visitation.

[Source: Transferred from 340:105-11-245 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-3. Reporting system

- (a) **Reporting by Office staff.** Office staff shall:
- (1) Identify significant problems by establishing a statewide reporting system including the collection and analysis of quarterly reports from area ombudsman staff;
 - (2) Receive and analyze reports from all state agencies receiving complaints on, or conducting surveys or inspections of long-term

care facilities, in order to identify significant problems;

(3) Develop administrative and legislative proposals to resolve significant problems of residents, as reflected in complaint investigation and other data;

(4) Provide information and recommendations to involved agencies on significant issues, after monitoring conditions of long-term care facilities through the area program and collection and analysis of data; and

(5) Compile information and annually prepare and disseminate a Program annual report. The report contains data and findings regarding the types of problems experienced and complaints received by or on behalf of individuals residing in long-term care facilities, and provides policy, regulatory and legislative recommendations to resolve such problems and complaints and improve the quality of care and life in long-term care facilities.

(b) Reporting by Area ombudsman staff. Area ombudsman staff shall

(1) Collect and compile data from volunteer monthly reports and from other required Program activities into quarterly reports, which are submitted to state ombudsman staff;

(2) Monitor conditions in certain facilities for informal reporting on a follow up basis to state ombudsman staff; and

(3) Respond to requests from state ombudsman staff for reports or updates on local conditions relating to specific issues being addressed statewide.

[Source: Transferred from 340:105-11-244 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-4. Provision of information

(a) The Office, Ombudsman, designated Office staff, and Area ombudsman staff provide information to public and private agencies, legislators, the media, and other persons regarding the problems and concerns of residents and recommendations related to the problems and concerns. The provision of information includes, but is not limited to:

(1) Administrative and legislative proposals as needed, relating to significant problems of residents in long-term care facilities, based on complaint investigation data and other sources;

(2) Communicating concerns of long-term care facility residents directly into the policy making process;

(3) Providing information on conditions affecting and the needs of long-term care facility residents, upon request, to individuals, agencies, organizations, and others;

(4) Meeting with the State Council on Aging's Advisory Committee for the Program to discuss Program operation, issues affecting the population served by the Program, and strategies to address identified concerns at least quarterly;

(b) Area ombudsman staff may undertake the following endeavors aimed to support the Ombudsman and Office staff:

(1) Delivering information to individuals, agencies, committees, and organizations concerning the general problems and issues affecting residents in long-term care facilities; and

(2) Engaging in community education on needs and issues affecting long-term care facility residents through publicity including monthly press releases, public speaking, and other means.

[Source: Transferred from 340:105-11-239 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-5. Systems Advocacy, monitoring laws, regulations, and policies

(a) The Office is required and authorized to:

- (1) Analyze, comment on, and monitor the development and implementation of federal, state, and local laws, regulations, and other government policies and actions that pertain to long-term care facilities and services;
- (2) Monitor the health, safety, welfare, and rights of residents; and
- (3) Recommend changes in such laws, regulations, and policies as the Office determines appropriate.

(b) Office staff may:

- (1) Require and share with area programs, citizen organizations, and individuals copies of proposed and enacted laws, regulations, and policies that may affect long-term care facility residents;
- (2) Give testimony and written comments as appropriate and assist others learn of comment opportunities;
- (3) Attend or conduct public hearings;
- (4) Request comments from area ombudsman staff; and
- (5) Investigate complaints and take action as necessary to monitor the development and implementation of laws, rules, and policies.

(c) Area ombudsman staff may:

- (1) Review proposed and enacted laws, regulations, and policies that may affect long-term care facility residents in the planning and service area (PSA), as provided by Office staff;
- (2) Give testimony and written comments, and attend or conduct public hearings, as appropriate;
- (3) Investigate complaints; and
- (4) Communicate concerns identified through the above activities to Office staff.

(d) The Office makes determinations and establishes positions of the Office independently. Those determinations or positions may or may not represent the determinations or positions of OAG and are not subject to approval by OAG.

[Source: Transferred from 340:105-11-238 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-6. Procedures related to the disclosure of witnessed abuse, neglect, or exploitation

When the Office, Ombudsman, or Office representative personally witnesses suspected abuse, gross neglect, or exploitation of a resident, the Ombudsman or representative shall seek communication of informed

consent from such resident to disclose resident-identifying information to appropriate agencies.

(1) When the resident is able to communicate informed consent or has a resident representative available to provide informed consent, the Ombudsman or representative follows the resident's or resident representative's direction.

(2) When the resident is unable to communicate informed consent and has no resident representative available to provide informed consent, the Ombudsman or representative opens a case with the Ombudsman or representative as the complainant, follows the Office's program complaint resolution procedures, refers the matter, and discloses the resident's identifying information to facility management where the resident resides and/or to the appropriate agency or agencies for substantiation of abuse, gross neglect, or exploitation in the following circumstances the:

(A) Ombudsman or representative has no evidence indicating the resident would not want a referral to be made;

(B) Ombudsman or representative has reasonable cause to believe disclosure is in the resident's best interest; and

(C) representative obtains Ombudsman or deputy ombudsman approval.

(3) In addition, the Ombudsman or representative, following Office policies and procedures, may report suspected abuse, gross neglect, or exploitation to other appropriate agencies for regulatory oversight; protective services; access to administrative, legal, or other remedies; and/or law enforcement action.

(4) The decision to grant or deny Ombudsman or deputy ombudsman approval for confidential information disclosure related to abuse, neglect, or exploitation is made and conveyed to the requesting ombudsman in one business day.

[Source: Transferred from 340:105-11-243.1 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-7. Designation of area programs and area representatives including staff and volunteers

(a) The Office officially designates agencies serving as area or local subdivisions of the Office through an annual designation process pursuant to OAG administrative funding procedures.

(1) Area program staff and volunteer representatives are officially designated in writing by the State Long-Term Care Ombudsman.

(2) Designation as an Office representative:

(A) For area staff is based on criteria necessary for satisfactory performance including, but not limited to:

(i) being free from any conflict of interest as defined by this rule and in compliance with federal and state statutes; and does not stand to gain financially through an action or potential action brought on behalf of the residents he or she serves;

- (ii) meeting minimum Office job qualifications and screening standards; and
- (iii) satisfactorily completing training prescribed by the Ombudsman; and

(B) As an ombudsman volunteer is accomplished through a designation process, and is based on the individual meeting criteria necessary to satisfactory performance in the position including, but not limited to, the person:

- (i) being free from any conflict of interest as required by statute and defined by this Chapter and he or she does not stand to gain financially through an action or potential action brought on behalf of residents the ombudsman serves;
- (ii) meets screening criteria set in this Chapter;
- (iii) satisfactorily completes training prescribed by the Ombudsman; and
- (iv) completes and signs:

- (I) The Ombudsman Volunteer Application, agreeing to accept supervision and follow Program rules and guidelines; and
- (II) the Registry and criminal history record check consent and release form for the Oklahoma National Fingerprint Background Check Program, authorizing the Office to conduct a national fingerprint background and registry checks.

(b) The Ombudsman has authority to refuse to designate:

(1) An individual, staff or volunteer, as an Office representative for any reasonable cause related to unsatisfactory performance in the position including, but not limited to:

- (A) an unresolved or unresolvable conflict of interest;
- (B) failure to satisfactorily complete training; and
- (C) failure to meet screening standards for volunteers and staff including a national fingerprint background and registry check or minimum job qualifications; and

(2) An entity as a subdivision of the Office for any reasonable cause that prevents satisfactory operation of the Program including, but not limited to:

- (A) an unresolved or unresolvable conflict of interest;
- (B) failure to provide adequate assurances that Program guidelines can be met; and
- (C) failure to provide assurances that the Program can be adequately funded.

(c) The Ombudsman has the authority to withdraw designation as:

(1) A subdivision of the Office from a designated entity when there is:

- (A) an unresolved or unresolvable conflict of interest;
- (B) a breach of the confidentiality requirement caused by the action of any staff of the designated entity as a local subdivision of the Office or of that designated entity's sponsoring agency;

- (C) failure to adhere to Office policies, the federal Administration on Aging regulations, federal or state law; or
- (D) any other unreasonable or prejudicial conduct substantially affecting the Program; and

(2) An Office representative from a staff person or volunteer when there is:

- (A) an unresolved or unresolvable conflict of interest;
- (B) breach of the confidentiality requirement;
- (C) failure to adhere to Office policies or federal or state law;
- (D) failure to accept program supervision from the Office; or
- (E) when the prospective representative is determined to be ineligible by the Oklahoma State Department of Health National Fingerprint Background Check Program.

(d) The Ombudsman may also withdraw designation of an ombudsman volunteer when he or she:

- (1) fails to file monthly reports with the ombudsman supervisor for three consecutive months, unless on approved leave of absence;
- (2) fails to attend three consecutive monthly meetings, unless on approved leave of absence;
- (3) fails to initiate resident visitation in assigned facility within two months after designation;
- (4) misuses the "ombudsman volunteer" title or badge; or
- (5) without specific authorization by the Ombudsman, represents himself or herself either verbally or by wearing a badge as an ombudsman for a facility for which the volunteer is not designated.

(e) An agency that is refused designation or from which designation is withdrawn as an designated entity or an individual refused designation or from whom designation is withdrawn as an area ombudsman staff representative may appeal the decision. Designation is not withdrawn until reasonable notice and opportunity for a hearing is provided.

(f) The follow rules of procedure apply in appeals of refused or withdrawn designations:

- (1) The Ombudsman shall send a notification of such refusal or withdrawal advising the agency or individual (appealing party) of their the right to appeal.
- (2) A request for hearing must be submitted within ten calendar days of the receipt of the letter of notification of the decision to refuse or withdraw designation.
- (3) The agency or individual appealing the refusal or withdrawal may submit a response to accompany its request for hearing. If a response is submitted, the Ombudsman may submit a reply to the response no later than five days after the request for hearing and response are received.
- (3) Hearings are conducted by OAG or its designated hearing officer. The hearings must be electronically recorded. All testimony shall be taken under oath. The hearing officer may

admit relevant, material, substantial, competent and reliable evidence but may also exclude incompetent, irrelevant, immaterial and unduly repetitious evidence.

(4) The hearing officer may set a time limit for each side to present its case. The appealing party may reserve a portion of its time for rebuttal.

(5) The Ombudsman may suspend a designated ombudsman entity or staff representative from engaging in any and all Program duties pending the conclusion of a hearing.

(6) Notwithstanding the findings of hearing officer, the Ombudsman retains authority to refuse or withdraw the designation regardless of the hearing officer's findings if the Ombudsman determines that such findings contradict or violate federal law or regulations.

[Source: Transferred from 340:105-11-234 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-8. Responsibilities of agencies hosting local ombudsman representatives

(a) The designated entity in which a local Office Program is organizationally located is responsible for the personnel management, but not programmatic oversight of Office representatives, including employees and volunteer representatives.

(b) The designated entity in which a local program is organizationally located does not have personnel policies or practices that prohibit Office representatives from performing the duties or from adhering to the access, confidentiality, and disclosure requirements of federal and state laws and regulations.

(1) Host agencies may not have policies, procedures, or practices including personnel management practices that the State Long-Term Care Ombudsman determines conflictive with the laws or policies governing the Program.

(2) Any policy, procedure, or practice the Ombudsman determines to be in violation of federal or state laws and regulations is sufficient grounds for the refusal, suspension, or removal of the designation of local ombudsman entity by the Ombudsman.

(3) Nothing in this provision prohibits the host agency from requiring that Office representatives adhere to the personnel policies and procedures of the agency that are otherwise lawful.

[Source: Transferred from 340:105-11-234.1 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-9. Duties of representatives of the Office of the State Long-Term Care Ombudsman

The State Long-Term Care Ombudsman (Ombudsman) may designate an entity as a local ombudsman entity and may designate an employee or volunteer of the local ombudsman entity as an Office representative. Office representatives may also be designated employees or volunteers within the Office. An individual designated as an Office

representative per Oklahoma Department of Human Services (DHS) and Office policies and procedures:

- (1) identifies, investigates, and resolves complaints made by or on behalf of residents that relate to action, inaction, or decisions that may adversely affect the health, safety, welfare, or rights of the residents;
- (2) provides assistance to protect the health, safety, welfare, and rights of residents;
- (3) ensures residents in the local ombudsman entity service area have regular and timely access to the services provided through the State Long-Term Care Ombudsman Program and that residents and complainants receive timely responses to requests for information and complaints;
- (4) represents the interests of residents before government agencies and ensures individual residents have access to and pursue, as the representative determines necessary and consistent with resident interest, administrative, legal, and other remedies to protect the health, safety, welfare, and rights of the residents;
- (5) reviews, and when necessary, comments on any existing and proposed laws, regulations, and other government policies and actions pertaining to residents' rights and well-being;
- (6) facilitates public comment on the laws, regulations, policies, and actions;
- (7) promotes and provides technical support for development and ongoing support when requested by resident and family councils; and
- (8) carries out other activities the Ombudsman determines to be appropriate.

[Source: Transferred from 340:105-11-234.2 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-4-10. Assistant Secretary for Aging's initiatives

- (a) The State Agency implements any additional program requirements deemed necessary by the Assistant Secretary for Aging and provides guidelines for the Area Agencies on Aging (AAAs) for implementation of such additional requirements.
- (b) The AAAs or other designated local ombudsman entity complies with such additional requirements initiated by the Assistant Secretary for Aging, based on guidelines provided by the State Agency.

[Source: Transferred from 340:105-11-241 by SB 1709 (2024), eff 11-1-24]

SUBCHAPTER 5. PERSONNEL AND VOLUNTEER MANAGEMENT

75:55-5-1. Area Agency on Aging ombudsman supervisor I

(a) **Definition.** Under the program supervision of the Office and the general direction of the director of an Area Agency on Aging, the ombudsman supervisor I provides leadership in development, coordination, and implementation of the Program and receives, investigates, and resolves complaints made by or on behalf of residents of long-term care facilities.

(b) **Examples of duties.** Examples of duties include:

- (1) recruiting, screening, training, and supervising ombudsman volunteers using guidelines provided by state ombudsman staff;
- (2) publicizing the services of the Program and issues affecting older residents of long-term care facilities through media releases, public speaking, and other means;
- (3) coordinating with state ombudsman staff in complaint investigation and resolution, identification of priority issues, and certification of new ombudsman volunteers;
- (4) maintaining confidentiality of files and other information pertaining to complaints and complainants;
- (5) keeping the director of the designated area ombudsman entity informed of the current situation and needs at the local level, recommending plans for meeting needs, and advising the director of resources required for their implementation;
- (6) being available to residents of long-term care facilities in the planning and service areas (PSAs), visiting each facility regularly, and working cooperatively with administrators and staff; and
- (7) serving as a consultant to community organizations and agencies on issues and needs affecting older long-term care facility residents, techniques of working with these older people, and the solution of special problems.

(c) **Salary range.** The comparable job family descriptor for this position is Adult Protective Services Specialist, #H26A under the Office of Management and Enterprise Service's Human Capital Management Job Catalog. A person in this position may not be hired at a salary more than the midpoint, nor paid more than the maximum of the approved salary range specified for Pay Band I under the Office of Management and Enterprise Service's Human Capital Management state employee pay structure. For the purpose of determining annual salary longevity pay is not considered.

[Source: Transferred from 340:105-11-249 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-5-2. Area Agency on Aging ombudsman supervisor II

(a) **Definition.** Under the program supervision of the Office and the general direction of the director of an Area Agency on Aging, the ombudsman supervisor II provides leadership in development, coordination, and implementation of the Program and receives, investigates, and resolves complaints made by, or on behalf of, residents of long-term care facilities.

(b) **Examples of duties.** Examples of duties include:

- (1) recruiting, screening, training, and supervising ombudsman volunteers using guidelines provided by state ombudsman staff;

- (2) publicizing the services of the Program and issues affecting older residents of long-term care facilities through media releases, public speaking, and other means;
- (3) coordinating with state ombudsman staff in complaint investigation and resolution, identification of priority issues, and certification of new ombudsman volunteers;
- (4) maintaining confidentiality of files and other information pertaining to complaints and complainants;
- (5) keeping the director of the designated area ombudsman entity informed of the current situation and needs at the local level, recommending plans for meeting needs, and advising the director of resources required for their implementation;
- (6) being available to residents of long-term care facilities in the planning and service areas (PSAs), visiting each facility regularly, and working cooperatively with administrators and staff; and
- (7) serving as a consultant to community organizations and agencies on issues and needs affecting older long-term care facility residents, techniques of working with these older people, and the solution of special problems.

(c) **Salary range.** The comparable job family descriptor for this position is an Adult Protective Services Specialist, #H26B under the Office of Management and Enterprise Service's Human Capital Management Job Catalog. A person in this position may not be hired at a salary more than the midpoint nor paid more than the maximum of the approved salary range specified for Pay Band J under the Office of Management and Enterprise Service's Human Capital Management state employee pay structure. For the purpose of determining annual salary longevity pay is not considered.

[Source: Transferred from 340:105-11-250 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-5-3. Screening criteria for ombudsman

(a) Criteria for subjective screening of potential ombudsman staff and volunteers is reviewed in addition to standard education and work experience questions.

(b) Persons who are not eligible for ombudsman volunteer designation include any individual who:

- (1) was terminated from employment in a facility where he or she wants to volunteer;
- (2) is a relative of a current employee of the facility where he or she wants to volunteer;
- (3) lacks the ability to be objective or hold confidences;
- (4) is a current employee or has any financial interest in a facility where he or she wants to volunteer. The person may volunteer in another facility located in a separate planning and services area;
- (5) is a paid sitter, private duty nurse or aide in the facility where the person wants to volunteer. If a competitive facility is chosen, the placement is accepted by the chosen facility;
- (6) is involved in a pending law suit against a facility, until the legal process is completed and acceptance of the person as a

volunteer is made by the selected facility administrator;
(7) stands to gain financially through an action or potential action brought on behalf of persons the Program serves; or
(8) was determined to be ineligible by the Oklahoma State Department of Health National Fingerprint Background Check Program.

[Source: Transferred from 340:105-11-251 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-5-4. Training

The Office prohibits investigation of any complaint by Office staff or an ombudsman volunteer, unless the person satisfactorily completed training required by the Office, and is approved by the State Long-Term Care Ombudsman as qualified to investigate complaints.

(1) Office staff shall:

- (A) Orient and train ombudsman staff representatives and determines satisfactory completion of prescribed training;
- (B) Develop and periodically update training core curriculum;
- (C) Assist area ombudsman staff train ombudsman volunteers;
- (D) Provide on a quarterly basis, a minimum of forty hours of continuing education and training to ombudsman supervisors per year;
- (E) Provide community education with area staff;
- (F) officially certify newly-trained, ombudsman volunteers who met screening criteria; and
- (G) Assist in the development of citizen organizations to participate in the Program.

(2) Area ombudsman staff shall:

- (A) Hold public workshops for community education and volunteer recruitment;
- (B) Train ombudsman volunteer applicants using the Office-prescribed core training format;
- (C) Submit the name, facility assignment, and original signed Form 02OM003E, Ombudsman Volunteer Application, of each volunteer recommended for designation;
- (D) Accompany each newly-certified ombudsman volunteer on at least one introductory visit to the assigned facility to reinforce training and ensure the ombudsman volunteer's understanding of the ombudsman role; and
- (E) Hold monthly meetings for continued training and supervision of designated ombudsman volunteers to annually achieve a minimum of eighteen hours per volunteer of continuing education relevant to the care of older persons and persons with disabilities.

[Source: Transferred from 340:105-11-240 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-5-5. Office staff and volunteer training

(a) **Paid ombudsman staff training curriculum.** New ombudsman staff training includes 90 hours of introductory education in:

- (1) the Program;
- (2) Program policies and procedures;
- (3) the complaint investigation and response system;
- (4) the long-term care regulatory system;
- (5) residents' rights;
- (6) characteristics of long-term care facilities and residents;
- (7) aging processes;
- (8) communication skills;
- (9) legal and ethical issues;
- (10) a visitation practicum;
- (11) mediation or negotiation skills;
- (12) community resources or services;
- (13) volunteer management;
- (14) reporting and record keeping;
- (15) adult abuse, neglect, and exploitation investigations; and
- (16) testing to determine an understanding of the curriculum.

(b) **Volunteer ombudsman training curriculum.** Ombudsman volunteer training includes 12 hours of introductory education in:

- (1) the Program;
- (2) the ombudsman volunteer role, including activities and responsibilities;
- (3) problem-solving and complaint investigation;
- (4) aging processes;
- (5) characteristics of long-term care facilities and residents;
- (6) communication and interviewing skills;
- (7) Oklahoma's Nursing Home Care Act, Residential Care Act, or Assisted Living Act, as appropriate;
- (8) residents' rights in long-term care facilities;
- (9) long-term care regulation;
- (10) confidentiality;
- (11) reporting and record keeping; and
- (12) a visitation practicum.

[Source: Transferred from 340:105-11-255 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]

75:55-5-6. Ombudsman volunteer rules and guidelines

The designated ombudsman volunteer observes the requirements of the Program. The ombudsman volunteer:

- (1) completes and signs the following forms:
 - (A) Ombudsman Volunteer Application;
 - (B) Conflict of Interest Statement and Ethical Guidelines;and
 - (C) Request for Background Check;
- (2) completes the two-day ombudsman volunteer training program to be designated by Program staff;
- (3) accepts supervision by the ombudsman supervisor;

- (4) respects privacy and confidentiality.
 - (A) The volunteer does not disclose information regarding any complainants or participant's name, condition, or situation, except to the ombudsman supervisor or Office staff, without the written permission of the complainant, participant, or legal representative.
 - (B) Supervisory approval is secured before any information is released;
- (5) visits weekly with residents in the assigned facility;
- (6) attends monthly ombudsman volunteer meetings for continuing education, program updates, and group supervision;
- (7) submits monthly reports to the ombudsman supervisor;
- (8) wears the badge issued by the designated entity ombudsman supervisor when visiting the facility or attending functions as an ombudsman volunteer;
- (9) is available to the facility residents, hears their concerns, and assists them with, and follows-up on problem-solving;
- (10) meets with the facility administrator to establish and maintain a cooperative working relationship;
- (11) is familiar with facility policies and procedures established for its operation;
- (12) is designated as an ombudsman volunteer, limited to the facility named in the designation letter, unless authorized in advance by the Ombudsman;
- (13) is clear in understanding the ombudsman volunteer role on behalf of the residents; and
- (14) does not perform direct care services, such as lifting, feeding, or transporting residents.

[Source: Transferred from 340:105-11-248 by SB 1709 (2024), eff 11-1-24; Amended at 42 Ok Reg, Number 20, effective 7-11-25]