

**CHAPTER 40. DEVELOPMENTAL DISABILITIES SERVICES**  
**SUBCHAPTER 5. CLIENT MEMBER SERVICES**  
**PART 1. COMPANION/ADULT FOSTER CARE**  
**SERVICES BY AGENCY**

**317:40-5-5. Agency Companion Services provider responsibilities**

(a) Providers of Agency Companion Services (ACS) are required to meet all applicable standards outlined in this subchapter and competency-based training described in OAC 340:100-3-38. The provider agency ensures that all companions meet the criteria in this Section.

(b) Failure to follow any rules or standards, failure to promote the independence of the ~~service recipient~~ member, or failure to follow recommendation(s) of the personal support team (Team) results in problem resolution, as described in subsection (b) of OAC 340:100-3-27, for the companion and, if warranted, revocation of approval of the companion.

(c) In addition to the criteria given in OAC 317:40-5-4 the companion:

(1) ensures no other adult or child is served in the home on a regular or part-time basis without prior written authorization from the Oklahoma Department of Human Services' Developmental Disabilities Services Division (DDSD) area manager or designee;

(2) meets the requirements of OAC 317:40-5-103, Transportation. Neither the companion nor the provider agency may claim transportation reimbursement for vacation travel;

(3) transports or arranges transportation for the ~~service recipient~~ member to and from school, employment programs, recreational activities, medical appointments, and therapy appointments;

(4) delivers services in a manner that contributes to the ~~service recipient's~~ member's enhanced independence, self sufficiency, community inclusion, and well-being;

(5) participates ~~as a member of~~ in the ~~service recipient's~~ member's Team and assists in the development of the ~~service recipient's~~ member's Individual Plan for service provision;

(6) with assistance from the DDSD case manager and the provider agency program coordination staff, develops, implements, evaluates, and revises the training strategies corresponding to the relevant outcomes for which the companion is responsible, as identified in the Individual Plan;

(A) The companion develops and gives monthly data collection and health care summaries to the provider agency program coordination staff.

(B) The agency staff provides monthly reports to the DDSD

case manager or nurse.

- (7) delivers services at appropriate times as directed in the Individual Plan;
- (8) does not deliver services that duplicate the services mandated to be provided by the public school district pursuant to the Individuals with Disabilities Education Act (IDEA);
- (9) is sensitive to and assists the ~~service recipient member~~ in participating in the ~~service recipient's member's~~ chosen religious faith. No ~~service recipient member~~ is expected to attend any religious service against his or her wishes;
- (10) participates in and supports visitation and contact with the ~~service recipient's member's~~ natural family, guardian, and friends, provided this visitation is desired by the ~~service recipient member~~;
- (11) obtains permission from the ~~service recipient's member's~~ legal guardian, if a guardian is assigned, and notifies the family, the provider agency program coordination staff, and the case manager prior to:
  - (A) traveling out of state;
  - (B) overnight visits; or
  - (C) involvement of the ~~service recipient member~~ in any publicity;
- (12) serves as the ~~service recipient's member's~~ health care coordinator in accordance with OAC 340:100-5-26;
- (13) ensures the monthly room and board contribution received from the ~~service recipient member~~ as reflected on OKDHS Form ~~DDS SAB-1~~ 06AC074E, Service Authorization Budget (SAB), is used toward the cost of operating the household;
- (14) assists the ~~service recipient member~~ to access entitlement programs for which the ~~service recipient member~~ may be eligible and maintains records required for the ~~service recipient's member's~~ ongoing eligibility;
- (15) works closely with the provider agency program coordination staff and the DDS case manager to ensure all aspects of the ~~service recipient's member's~~ program are implemented to the satisfaction of the ~~service recipient member~~, the ~~service recipient's member's~~ family or legal guardian, when appropriate, and the ~~service recipient's member's~~ Team;
- (16) assists the ~~service recipient member~~ in achieving the ~~service recipient's member's~~ maximum level of independence;
- (17) submits, in a timely manner, to the provider agency program coordination staff all necessary information regarding the ~~service recipient member~~;
- (18) ensures that the ~~service recipient's member's~~ confidentiality is maintained in accordance with OAC 340:100-3-2;
- (19) supports the ~~service recipient member~~ in forming and

maintaining friendships with neighbors, co-workers, and peers, including people who do not have disabilities;

(20) implements training and provides supports that enable the ~~service recipient~~ member to actively join in community life;

(21) does not serve as representative payee for the ~~service recipient~~ member without a written exception approval from the DDSD area manager or designee;

(A) The written approval is retained in the ~~service recipient's~~ member's home record.

(B) When serving as payee, the companion complies with the requirements of OAC 340:100-3-4.1.

(22) ensures the ~~service recipient's~~ member's funds are properly safeguarded.

(23) must obtain prior approval from the provider agency when making a purchase of over \$50.00 with the ~~service recipient's~~ member's funds;

(24) allows the provider agency staff and DDSD staff to make announced and unannounced visits to the home;

(25) develops an Evacuation Plan, OKDHS Form ~~DDS-20~~ 06AC020E, for the home and conducts training with the ~~service recipient~~ member;

(26) conducts fire and weather drills at least quarterly and maintains the Fire and Weather Drill Record, OKDHS Form ~~DDS-21~~ 06AC021E, available for review:

(27) develops and maintains a Personal Possession Inventory, OKDHS Form ~~DDS-22~~ 06AC022E, documenting the ~~service recipient's~~ member's possessions and adaptive equipment;

(28) supports the ~~service recipient's~~ member's employment program by:

(A) assisting the ~~service recipient~~ member to wear appropriate work attire; and

(B) contacting the ~~service recipient's~~ member's employer only as outlined by the Team and in the Individual Plan; and

(29) follows all applicable rules promulgated by the Oklahoma Health Care Authority or DDSD, including:

(A) OAC 340:100-3-40, Community records ~~system~~;

(B) OAC 340:100-5-50 through 100-5-58, Individual planning;

(C) OAC 340:100-5-26, Health services;

(D) OAC ~~340:100-5-34~~ 340:100-3-34, Incident reporting;

(E) OAC 340:100-5-32, Medication administration;

(F) OAC 340:100-5-22.1, Community residential supports;

(G) OAC ~~340:100-3-24~~ 340:100-3-27, Quality assurance; and

(H) OAC 340:100-3-38, Staff training.