



## Personal Supports Staff Agreement

In accordance with The Maryland Home and Community Based Waiver guidelines, The Arc Northern Chesapeake Region may allow a family member, relative, legal guardian or other Adult Care Taker to act as a service provider under both the traditional and self-directed service model.

Individuals who are receiving services from a DDA provider agency have the option to choose a provider that is not an employee of the agency under the following conditions:

1. The care provider has had current First Aid and CPR training;
2. The care provider has passed a criminal background check;
3. They agree to learn the your preferences;
4. They agree to learn information about your disability.

Individuals choosing their own care provider must provide The Arc Northern Chesapeake Region with verification that all of the above conditions have been met. This information will be maintained in your record for compliance monitoring. All individualized training must be reviewed with the care provider at a minimum of once a year, and documentation of the training must be provided to The Arc Northern Chesapeake Region for their records. All re-certifications must be received within 30 days of the expiration date or the agency may refuse to process payment for services until the documentation is received. The Arc Northern Chesapeake Region can provide your care giver the opportunity to take First Aid and CPR training at a reduced cost. Please contact Family Support Services for further information.

By signing this agreement I, \_\_\_\_\_ agree to train my care provider on my needs, choices, preferences, and disability. My care provider has submitted verification of successful completion of First Aid and CPR training, and has passed a criminal background check.

\_\_\_\_\_  
Individual/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Individual/ Guardian Name

\_\_\_\_\_  
Date