

As Reported by the House Judiciary Committee

131st General Assembly

Regular Session

2015-2016

Am. H. B. No. 24

Representatives Dovilla, Retherford

**Cosponsors: Representatives Anielski, Antonio, Derickson, Dever, Duffey, Fedor,
Kraus, Maag, Manning, Sprague, Thompson**

A BILL

To amend sections 173.501, 173.521, 173.542, 1
2317.54, 4715.36, 5101.60, 5101.61, 5101.611, 2
5101.62 to 5101.64, 5101.66 to 5101.71, 5101.99, 3
5123.61, and 5126.31; to amend, for the purpose 4
of adopting new section numbers as indicated in 5
parentheses, sections 5101.61 (5101.63), 6
5101.611 (5101.64), 5101.62 (5101.65), 5101.63 7
(5101.651), 5101.64 (5101.66), 5101.65 8
(5101.68), 5101.66 (5101.681), 5101.67 9
(5101.682), 5101.68 (5101.69), 5101.69 10
(5101.70), 5101.70 (5101.71), 5101.71 (5101.61), 11
and 5101.72 (5101.611); and to enact new section 12
5101.62 and sections 5101.631, 5101.632, 13
5101.701, 5101.702, 5101.74, and 5101.741 of the 14
Revised Code to revise the laws governing the 15
provision of adult protective services. 16

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 173.501, 173.521, 173.542, 17
2317.54, 4715.36, 5101.60, 5101.61, 5101.611, 5101.62, 5101.63, 18

5101.64, 5101.66, 5101.67, 5101.68, 5101.69, 5101.70, 5101.71, 19
5101.99, 5123.61, and 5126.31 be amended; sections 5101.61 20
(5101.63), 5101.611 (5101.64), 5101.62 (5101.65), 5101.63 21
(5101.651), 5101.64 (5101.66), 5101.65 (5101.68), 5101.66 22
(5101.681), 5101.67 (5101.682), 5101.68 (5101.69), 5101.69 23
(5101.70), 5101.70 (5101.71), 5101.71 (5101.61), and 5101.72 24
(5101.611) be amended for the purpose of adopting new section 25
numbers as indicated in parentheses; and new section 5101.62 and 26
sections 5101.631, 5101.632, 5101.701, 5101.702, 5101.74, and 27
5101.741 of the Revised Code be enacted to read as follows: 28

Sec. 173.501. (A) As used in this section: 29

"Nursing facility" has the same meaning as in section 30
5165.01 of the Revised Code. 31

"PACE provider" has the same meaning as in the "Social 32
Security Act," section 1934(a)(3), 42 U.S.C. 1396u-4(a)(3). 33

(B) The department of aging shall establish a home first 34
component of the PACE program under which eligible individuals 35
may be enrolled in the PACE program in accordance with this 36
section. An individual is eligible for the PACE program's home 37
first component if both of the following apply: 38

(1) The individual has been determined to be eligible for 39
the PACE program. 40

(2) At least one of the following applies: 41

(a) The individual has been admitted to a nursing 42
facility. 43

(b) A physician has determined and documented in writing 44
that the individual has a medical condition that, unless the 45
individual is enrolled in home and community-based services such 46

as the PACE program, will require the individual to be admitted 47
to a nursing facility within thirty days of the physician's 48
determination. 49

(c) The individual has been hospitalized and a physician 50
has determined and documented in writing that, unless the 51
individual is enrolled in home and community-based services such 52
as the PACE program, the individual is to be transported 53
directly from the hospital to a nursing facility and admitted. 54

(d) Both of the following apply: 55

(i) The individual is the subject of a report made under 56
section ~~5101.61~~5101.63 of the Revised Code regarding abuse, 57
neglect, or exploitation or such a report referred to a county 58
department of job and family services under section 5126.31 of 59
the Revised Code or has made a request to a county department 60
for protective services as defined in section 5101.60 of the 61
Revised Code. 62

(ii) A county department of job and family services and an 63
area agency on aging have jointly documented in writing that, 64
unless the individual is enrolled in home and community-based 65
services such as the PACE program, the individual should be 66
admitted to a nursing facility. 67

(C) Each month, the department of aging shall identify 68
individuals who are eligible for the home first component of the 69
PACE program. When the department identifies such an individual, 70
the department shall notify the PACE provider serving the area 71
in which the individual resides. The PACE provider shall 72
determine whether the PACE program is appropriate for the 73
individual and whether the individual would rather participate 74
in the PACE program than continue or begin to reside in a 75

nursing facility. If the PACE provider determines that the PACE 76
program is appropriate for the individual and the individual 77
would rather participate in the PACE program than continue or 78
begin to reside in a nursing facility, the PACE provider shall 79
so notify the department of aging. On receipt of the notice from 80
the PACE provider, the department of aging shall approve the 81
individual's enrollment in the PACE program in accordance with 82
priorities established in rules adopted under section 173.50 of 83
the Revised Code. 84

Sec. 173.521. (A) Unless the medicaid-funded component of 85
the PASSPORT program is terminated pursuant to division (C) of 86
section 173.52 of the Revised Code, the department shall 87
establish a home first component of the PASSPORT program under 88
which eligible individuals may be enrolled in the medicaid- 89
funded component of the PASSPORT program in accordance with this 90
section. An individual is eligible for the PASSPORT program's 91
home first component if both of the following apply: 92

(1) The individual has been determined to be eligible for 93
the medicaid-funded component of the PASSPORT program. 94

(2) At least one of the following applies: 95

(a) The individual has been admitted to a nursing 96
facility. 97

(b) A physician has determined and documented in writing 98
that the individual has a medical condition that, unless the 99
individual is enrolled in home and community-based services such 100
as the PASSPORT program, will require the individual to be 101
admitted to a nursing facility within thirty days of the 102
physician's determination. 103

(c) The individual has been hospitalized and a physician 104

has determined and documented in writing that, unless the 105
individual is enrolled in home and community-based services such 106
as the PASSPORT program, the individual is to be transported 107
directly from the hospital to a nursing facility and admitted. 108

(d) Both of the following apply: 109

(i) The individual is the subject of a report made under 110
section ~~5101.61~~5101.63 of the Revised Code regarding abuse, 111
neglect, or exploitation or such a report referred to a county 112
department of job and family services under section 5126.31 of 113
the Revised Code or has made a request to a county department 114
for protective services as defined in section 5101.60 of the 115
Revised Code. 116

(ii) A county department of job and family services and an 117
area agency on aging have jointly documented in writing that, 118
unless the individual is enrolled in home and community-based 119
services such as the PASSPORT program, the individual should be 120
admitted to a nursing facility. 121

(B) Each month, each area agency on aging shall identify 122
individuals residing in the area that the agency serves who are 123
eligible for the home first component of the PASSPORT program. 124
When an area agency on aging identifies such an individual, the 125
agency shall notify the long-term care consultation program 126
administrator serving the area in which the individual resides. 127
The administrator shall determine whether the PASSPORT program 128
is appropriate for the individual and whether the individual 129
would rather participate in the PASSPORT program than continue 130
or begin to reside in a nursing facility. If the administrator 131
determines that the PASSPORT program is appropriate for the 132
individual and the individual would rather participate in the 133
PASSPORT program than continue or begin to reside in a nursing 134

facility, the administrator shall so notify the department of 135
aging. On receipt of the notice from the administrator, the 136
department shall approve the individual's enrollment in the 137
medicaid-funded component of the PASSPORT program regardless of 138
the unified waiting list established under section 173.55 of the 139
Revised Code, unless the enrollment would cause the component to 140
exceed any limit on the number of individuals who may be 141
enrolled in the component as set by the United States secretary 142
of health and human services in the PASSPORT waiver. 143

Sec. 173.542. (A) Unless the medicaid-funded component of 144
the assisted living program is terminated pursuant to division 145
(C) of section 173.54 of the Revised Code, the department of 146
aging shall establish a home first component of the assisted 147
living program under which eligible individuals may be enrolled 148
in the medicaid-funded component of the assisted living program 149
in accordance with this section. An individual is eligible for 150
the assisted living program's home first component if both of 151
the following apply: 152

(1) The individual has been determined to be eligible for 153
the medicaid-funded component of the assisted living program. 154

(2) At least one of the following applies: 155

(a) The individual has been admitted to a nursing 156
facility. 157

(b) A physician has determined and documented in writing 158
that the individual has a medical condition that, unless the 159
individual is enrolled in home and community-based services such 160
as the assisted living program, will require the individual to 161
be admitted to a nursing facility within thirty days of the 162
physician's determination. 163

(c) The individual has been hospitalized and a physician 164
has determined and documented in writing that, unless the 165
individual is enrolled in home and community-based services such 166
as the assisted living program, the individual is to be 167
transported directly from the hospital to a nursing facility and 168
admitted. 169

(d) Both of the following apply: 170

(i) The individual is the subject of a report made under 171
section ~~5101.61~~5101.63 of the Revised Code regarding abuse, 172
neglect, or exploitation or such a report referred to a county 173
department of job and family services under section 5126.31 of 174
the Revised Code or has made a request to a county department 175
for protective services as defined in section 5101.60 of the 176
Revised Code. 177

(ii) A county department of job and family services and an 178
area agency on aging have jointly documented in writing that, 179
unless the individual is enrolled in home and community-based 180
services such as the assisted living program, the individual 181
should be admitted to a nursing facility. 182

(B) Each month, each area agency on aging shall identify 183
individuals residing in the area that the area agency on aging 184
serves who are eligible for the home first component of the 185
assisted living program. When an area agency on aging identifies 186
such an individual and determines that there is a vacancy in a 187
residential care facility participating in the medicaid-funded 188
component of the assisted living program that is acceptable to 189
the individual, the agency shall notify the long-term care 190
consultation program administrator serving the area in which the 191
individual resides. The administrator shall determine whether 192
the assisted living program is appropriate for the individual 193

and whether the individual would rather participate in the 194
assisted living program than continue or begin to reside in a 195
nursing facility. If the administrator determines that the 196
assisted living program is appropriate for the individual and 197
the individual would rather participate in the assisted living 198
program than continue or begin to reside in a nursing facility, 199
the administrator shall so notify the department of aging. On 200
receipt of the notice from the administrator, the department 201
shall approve the individual's enrollment in the medicaid-funded 202
component of the assisted living program regardless of the 203
unified waiting list established under section 173.55 of the 204
Revised Code, unless the enrollment would cause the component to 205
exceed any limit on the number of individuals who may 206
participate in the component as set by the United States 207
secretary of health and human services in the assisted living 208
waiver. 209

Sec. 2317.54. No hospital, home health agency, ambulatory 210
surgical facility, or provider of a hospice care program or 211
pediatric respite care program shall be held liable for a 212
physician's failure to obtain an informed consent from the 213
physician's patient prior to a surgical or medical procedure or 214
course of procedures, unless the physician is an employee of the 215
hospital, home health agency, ambulatory surgical facility, or 216
provider of a hospice care program or pediatric respite care 217
program. 218

Written consent to a surgical or medical procedure or 219
course of procedures shall, to the extent that it fulfills all 220
the requirements in divisions (A), (B), and (C) of this section, 221
be presumed to be valid and effective, in the absence of proof 222
by a preponderance of the evidence that the person who sought 223
such consent was not acting in good faith, or that the execution 224

of the consent was induced by fraudulent misrepresentation of 225
material facts, or that the person executing the consent was not 226
able to communicate effectively in spoken and written English or 227
any other language in which the consent is written. Except as 228
herein provided, no evidence shall be admissible to impeach, 229
modify, or limit the authorization for performance of the 230
procedure or procedures set forth in such written consent. 231

(A) The consent sets forth in general terms the nature and 232
purpose of the procedure or procedures, and what the procedures 233
are expected to accomplish, together with the reasonably known 234
risks, and, except in emergency situations, sets forth the names 235
of the physicians who shall perform the intended surgical 236
procedures. 237

(B) The person making the consent acknowledges that such 238
disclosure of information has been made and that all questions 239
asked about the procedure or procedures have been answered in a 240
satisfactory manner. 241

(C) The consent is signed by the patient for whom the 242
procedure is to be performed, or, if the patient for any reason 243
including, but not limited to, competence, minority, or the fact 244
that, at the latest time that the consent is needed, the patient 245
is under the influence of alcohol, hallucinogens, or drugs, 246
lacks legal capacity to consent, by a person who has legal 247
authority to consent on behalf of such patient in such 248
circumstances, including either of the following: 249

(1) The parent, whether the parent is an adult or a minor, 250
of the parent's minor child; 251

(2) An adult whom the parent of the minor child has given 252
written authorization to consent to a surgical or medical 253

procedure or course of procedures for the parent's minor child.	254
Any use of a consent form that fulfills the requirements	255
stated in divisions (A), (B), and (C) of this section has no	256
effect on the common law rights and liabilities, including the	257
right of a physician to obtain the oral or implied consent of a	258
patient to a medical procedure, that may exist as between	259
physicians and patients on July 28, 1975.	260
As used in this section the term "hospital" has the same	261
meaning as in section 2305.113 of the Revised Code; "home health	262
agency" has the same meaning as in section 5101.61 <u>3701.881</u> of	263
the Revised Code; "ambulatory surgical facility" has the meaning	264
as in division (A) of section 3702.30 of the Revised Code; and	265
"hospice care program" and "pediatric respite care program" have	266
the same meanings as in section 3712.01 of the Revised Code. The	267
provisions of this division apply to hospitals, doctors of	268
medicine, doctors of osteopathic medicine, and doctors of	269
podiatric medicine.	270
Sec. 4715.36. As used in this section and sections	271
4715.361 to 4715.374 of the Revised Code:	272
(A) "Accredited dental hygiene school" means a dental	273
hygiene school accredited by the American dental association	274
commission on dental accreditation or a dental hygiene school	275
whose educational standards are recognized by the American	276
dental association commission on dental accreditation and	277
approved by the state dental board.	278
(B) "Authorizing dentist" means a dentist who authorizes a	279
dental hygienist to perform dental hygiene services under	280
section 4715.365 of the Revised Code.	281
(C) "Clinical evaluation" means a diagnosis and treatment	282

plan formulated for an individual patient by a dentist.	283
(D) "Dentist" means an individual licensed under this chapter to practice dentistry.	284 285
(E) "Dental hygienist" means an individual licensed under this chapter to practice as a dental hygienist.	286 287
(F) "Dental hygiene services" means the prophylactic, preventive, and other procedures that dentists are authorized by this chapter and rules of the state dental board to assign to dental hygienists, except for procedures while a patient is anesthetized, definitive root planing, definitive subgingival curettage, the administration of local anesthesia, and the procedures specified in rules adopted by the board as described in division (C) (4) of section 4715.22 of the Revised Code.	288 289 290 291 292 293 294 295
(G) "Facility" means any of the following:	296
(1) A health care facility, as defined in section 4715.22 of the Revised Code;	297 298
(2) A state correctional institution, as defined in section 2967.01 of the Revised Code;	299 300
(3) A comprehensive child development program that receives funds distributed under the "Head Start Act," 95 Stat. 499 (1981), 42 U.S.C. 9831, as amended, and is licensed as a child day-care center;	301 302 303 304
(4) A residential facility licensed under section 5123.19 of the Revised Code;	305 306
(5) A public school, as defined in section 3701.93 of the Revised Code, located in an area designated as a dental health resource shortage area pursuant to section 3702.87 of the Revised Code;	307 308 309 310

- (6) A nonpublic school, as defined in section 3701.93 of the Revised Code, located in an area designated as a dental health resource shortage area pursuant to section 3702.87 of the Revised Code; 311
312
313
314
- (7) A federally qualified health center or federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code; 315
316
317
- (8) A shelter for victims of domestic violence, as defined in section 3113.33 of the Revised Code; 318
319
- (9) A facility operated by the department of youth services under Chapter 5139. of the Revised Code; 320
321
- (10) A foster home, as defined in section 5103.02 of the Revised Code; 322
323
- (11) A nonprofit clinic, as defined in section 3715.87 of the Revised Code; 324
325
- (12) The residence of one or more individuals receiving services provided by a home health agency, as defined in section ~~5101.61~~ 3701.881 of the Revised Code; 326
327
328
- (13) A dispensary; 329
- (14) A health care facility, such as a clinic or hospital, of the United States department of veterans affairs; 330
331
- (15) The residence of one or more individuals enrolled in a home and community-based services medicaid waiver component, as defined in section 5166.01 of the Revised Code; 332
333
334
- (16) A facility operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code; 335
336
337

(17) A women, infants, and children clinic;	338
(18) A mobile dental unit located at any location listed in divisions (G) (1) to (17) of this section;	339 340
(19) Any other location, as specified by the state dental board in rules adopted under section 4715.372 of the Revised Code, that is in an area designated as a dental health resource shortage area pursuant to section 3702.87 of the Revised Code and provides health care services to individuals who are medicaid recipients and to indigent and uninsured persons, as defined in section 2305.234 of the Revised Code.	341 342 343 344 345 346 347
Sec. 5101.60. As used in sections 5101.60 to 5101.71 of the Revised Code:	348 349
(A) <u>"Abandonment" means desertion of an adult by a caretaker without having made provision for transfer of the adult's care.</u>	350 351 352
(B) <u>"Abuse" means the infliction upon an adult by self or others of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical harm, pain, or mental anguish.</u>	353 354 355 356
(B)-(C) "Adult" means any person sixty years of age or older within this state who is handicapped by the infirmities of aging or who has a physical or mental impairment which prevents the person from providing for the person's own care or protection, and who resides in an independent living arrangement. An "independent living arrangement" is a domicile of a person's own choosing, including, but not limited to, a private home, apartment, trailer, or rooming house. An "independent living arrangement" includes a residential facility licensed under section 5119.34 of the Revised Code that provides	357 358 359 360 361 362 363 364 365 366

~~accommodations, supervision, and personal care services for~~ 367
~~three to sixteen unrelated adults, but does not include other~~ 368
~~institutions or facilities licensed by the state or facilities~~ 369
~~in which a person resides as a result of voluntary, civil, or~~ 370
~~criminal commitment.~~ 371

~~(C)~~ (D) "Area agency on aging" means a public or private 372
nonprofit entity designated under section 173.011 of the Revised 373
Code to administer programs on behalf of the department of 374
aging. 375

(E) "Caretaker" means the person assuming the primary 376
responsibility for the care of an adult ~~on~~ by any of the 377
following means: 378

(1) On a voluntary basis, ~~by~~ i 379

(2) By contract, ~~through~~ i 380

(3) Through receipt of payment for care, ~~as~~ i 381

(4) As a result of a family relationship, ~~or by~~ i 382

(5) By order of a court of competent jurisdiction. 383

~~(D)~~ (F) "Community mental health agency" means any agency, 384
program, or facility with which a board of alcohol, drug 385
addiction, and mental health services contracts to provide the 386
mental health services listed in section 340.09 of the Revised 387
Code. 388

(G) "Court" means the probate court in the county where an 389
adult resides. 390

~~(E)~~ (H) "Emergency" means that the adult is living in 391
conditions which present a substantial risk of immediate and 392
irreparable physical harm or death to self or any other person. 393

~~(F)~~ (I) "Emergency services" means protective services 394
furnished to an adult in an emergency. 395

~~(G)~~ (J) "Exploitation" means the unlawful or improper act 396
of a ~~caretaker~~ person using, in one or more transactions, an 397
adult or an adult's resources for monetary or personal benefit, 398
profit, or gain. 399

~~(H)~~ (K) "Financial harm" means impairing an adult's 400
financial assets by unlawfully obtaining or exerting control 401
over the adult's real or personal property in any of the 402
following ways: 403

(1) Without the adult's consent or the person authorized 404
to give consent on the adult's behalf; 405

(2) Beyond the scope of the express or implied consent of 406
the adult or the person authorized to give consent on the 407
adult's behalf; 408

(3) By deception; 409

(4) By threat; 410

(5) By intimidation. 411

(L) "In need of protective services" means an adult known 412
or suspected to be suffering from abuse, neglect, or 413
exploitation to an extent that either life is endangered or 414
physical harm, mental anguish, or mental illness results or is 415
likely to result. 416

~~(I)~~ (M) "Incapacitated person" means a person who is 417
impaired for any reason to the extent that the person lacks 418
sufficient understanding or capacity to make and carry out 419
reasonable decisions concerning the person's self or resources, 420
with or without the assistance of a caretaker. Refusal to 421

consent to the provision of services shall not be the sole 422
determinative that the person is incapacitated. ~~"Reasonable-~~ 423
~~decisions"~~ are decisions made in daily living which facilitate 424
the provision of food, shelter, clothing, and health care 425
necessary for life support. 426

~~(J)~~-(N) "Independent living arrangement" means a domicile 427
of a person's own choosing, including, but not limited to, a 428
private home, apartment, trailer, or rooming house. "Independent 429
living arrangement" includes a residential facility licensed 430
under section 5119.22 of the Revised Code that provides 431
accommodations, supervision, and personal care services for 432
three to sixteen unrelated adults, but does not include any 433
other institution or facility licensed by the state or a 434
facility in which a person resides as a result of voluntary, 435
civil, or criminal commitment. 436

(O) "Mental illness" means a substantial disorder of 437
thought, mood, perception, orientation, or memory that grossly 438
impairs judgment, behavior, capacity to recognize reality, or 439
ability to meet the ordinary demands of life. 440

~~(K)~~-(P) "Neglect" means any of the failure following: 441

(1) Failure of an adult to provide for self the goods or 442
services necessary to avoid physical harm, mental anguish, or 443
mental illness ~~or the failure;~~ 444

(2) Failure of a caretaker to provide such goods or 445
services; 446

(3) Abandonment. 447

~~(L)~~-(Q) "Outpatient health facility" means a facility 448
where medical care and preventive, diagnostic, therapeutic, 449
rehabilitative, or palliative items or services are provided to 450

outpatients by or under the direction of a physician or dentist. 451

(R) "Peace officer" means a peace officer as defined in 452
section 2935.01 of the Revised Code. 453

~~(M)~~(S) "Physical harm" means bodily pain, injury, 454
impairment, or disease suffered by an adult. 455

~~(N)~~(T) "Protective services" means services provided by 456
the county department of job and family services or its 457
designated agency to an adult who has been determined by 458
evaluation to require such services for the prevention, 459
correction, or discontinuance of an act of as well as conditions 460
resulting from abuse, neglect, or exploitation. Protective 461
services may include, but are not limited to, case work 462
services, medical care, mental health services, legal services, 463
fiscal management, home health care, homemaker services, 464
housing-related services, guardianship services, and placement 465
services as well as the provision of such commodities as food, 466
clothing, and shelter. 467

~~(O)~~(U) "Reasonable decisions" means decisions made in 468
daily living that facilitate the provision of food, shelter, 469
clothing, and health care necessary for life support. 470

(V) "Senior service provider" means a person who provides 471
care or specialized services to an adult, except that it does 472
not include the state long-term care ombudsperson or a regional 473
long-term care ombudsperson. 474

(W) "Working day" means Monday, Tuesday, Wednesday, 475
Thursday, and Friday, except when such day is a holiday as 476
defined in section 1.14 of the Revised Code. 477

Sec. ~~5101.71~~5101.61. (A) The county departments of job 478
and family services shall implement sections 5101.60 to 5101.71 479

~~of the Revised Code. The department of job and family services— 480
may provide a program of ongoing, comprehensive, formal training— 481
to county departments and other agencies authorized to implement— 482
sections 5101.60 to 5101.71 of the Revised Code. Training shall— 483
not be limited to the procedures for implementing section— 484
5101.62 of the Revised Code. 485~~

(B) The director of job and family services may adopt 486
rules in accordance with section 111.15 of the Revised Code 487
governing the county departments' implementation of sections 488
5101.60 to 5101.71 of the Revised Code. The rules adopted 489
pursuant to this division may include a requirement that the 490
county departments provide on forms prescribed by the rules a 491
plan of proposed expenditures, and a report of actual 492
expenditures, of funds necessary to implement sections 5101.60 493
to 5101.71 of the Revised Code. 494

Sec. ~~5101.72~~ 5101.611. The department of job and family 495
services, to the extent of available funds, may reimburse county 496
departments of job and family services for all or part of the 497
costs they incur in implementing sections 5101.60 to 5101.71 of 498
the Revised Code. The director of job and family services shall 499
adopt internal management rules in accordance with section 500
111.15 of the Revised Code that provide for reimbursement of 501
county departments of job and family services under this 502
section. 503

The director shall adopt internal management rules in 504
accordance with section 111.15 of the Revised Code that do both 505
of the following: 506

(A) Implement sections 5101.60 to 5101.71 of the Revised 507
Code; 508

(B) Require the county departments to collect and submit 509
to the department, or ensure that a designated agency collects 510
and submits to the department, data concerning the 511
implementation of sections 5101.60 to 5101.71 of the Revised 512
Code. 513

Sec. 5101.62. The department of job and family services 514
shall do all of the following: 515

(A) Provide a program of ongoing, comprehensive, formal 516
training on the implementation of sections 5101.60 to 5101.71 of 517
the Revised Code and require all protective services caseworkers 518
and their supervisors to undergo the training; 519

(B) Develop and make available educational materials for 520
individuals who are required under section 5101.63 of the 521
Revised Code to make reports of abuse, neglect, and 522
exploitation; 523

(C) Facilitate ongoing cooperation among state agencies on 524
issues pertaining to the abuse, neglect, or exploitation of 525
adults. 526

~~Sec. 5101.61~~ 5101.63. (A) ~~As used in this section:~~ 527

~~(1) "Senior service provider" means any person who 528~~
~~provides care or services to a person who is an adult as defined 529~~
~~in division (B) of section 5101.60 of the Revised Code. 530~~

~~(2) "Ambulatory health facility" means a nonprofit, public- 531~~
~~or proprietary freestanding organization or a unit of such an 532~~
~~agency or organization that: 533~~

~~(a) Provides preventive, diagnostic, therapeutic, 534~~
~~rehabilitative, or palliative items or services furnished to an 535~~
~~outpatient or ambulatory patient, by or under the direction of a 536~~

~~physician or dentist in a facility which is not a part of a 537
hospital, but which is organized and operated to provide medical 538
care to outpatients; 539~~

~~(b) Has health and medical care policies which are 540
developed with the advice of, and with the provision of review 541
of such policies, an advisory committee of professional 542
personnel, including one or more physicians, one or more 543
dentists, if dental care is provided, and one or more registered 544
nurses; 545~~

~~(c) Has a medical director, a dental director, if dental 546
care is provided, and a nursing director responsible for the 547
execution of such policies, and has physicians, dentists, 548
nursing, and ancillary staff appropriate to the scope of 549
services provided; 550~~

~~(d) Requires that the health care and medical care of 551
every patient be under the supervision of a physician, provides 552
for medical care in a case of emergency, has in effect a written 553
agreement with one or more hospitals and other centers or 554
clinics, and has an established patient referral system to other 555
resources, and a utilization review plan and program; 556~~

~~(e) Maintains clinical records on all patients; 557~~

~~(f) Provides nursing services and other therapeutic 558
services in accordance with programs and policies, with such 559
services supervised by a registered professional nurse, and has 560
a registered professional nurse on duty at all times of clinical 561
operations; 562~~

~~(g) Provides approved methods and procedures for the 563
dispensing and administration of drugs and biologicals; 564~~

~~(h) Has established an accounting and record keeping 565~~

~~system to determine reasonable and allowable costs;~~ 566

~~(i) "Ambulatory health facilities" also includes an 567
alcoholism treatment facility approved by the joint commission 568
on accreditation of healthcare organizations as an alcoholism 569
treatment facility or certified by the department of mental 570
health and addiction services, and such facility shall comply 571
with other provisions of this division not inconsistent with 572
such accreditation or certification. 573~~

~~(3) "Community mental health facility" means a facility 574
which provides community mental health services and is included 575
in the comprehensive mental health plan for the alcohol, drug 576
addiction, and mental health service district in which it is 577
located. 578~~

~~(4) "Community mental health service" means services, 579
other than inpatient services, provided by a community mental 580
health facility. 581~~

~~(5) "Home health agency" means an institution or a 582
distinct part of an institution operated in this state which: 583~~

~~(a) Is primarily engaged in providing home health 584
services; 585~~

~~(b) Has home health policies which are established by a 586
group of professional personnel, including one or more duly 587
licensed doctors of medicine or osteopathy and one or more 588
registered professional nurses, to govern the home health 589
services it provides and which includes a requirement that every 590
patient must be under the care of a duly licensed doctor of 591
medicine or osteopathy; 592~~

~~(c) Is under the supervision of a duly licensed doctor of 593
medicine or doctor of osteopathy or a registered professional 594~~

~~nurse who is responsible for the execution of such home health- 595
policies; 596~~

~~(d) Maintains comprehensive records on all patients; 597~~

~~(e) Is operated by the state, a political subdivision, or 598
an agency of either, or is operated not for profit in this state- 599
and is licensed or registered, if required, pursuant to law by- 600
the appropriate department of the state, county, or municipality- 601
in which it furnishes services; or is operated for profit in- 602
this state, meets all the requirements specified in divisions- 603
(A) (5) (a) to (d) of this section, and is certified under Title- 604
XVIII of the "Social Security Act," 49 Stat. 620 (1935), 42- 605
U.S.C. 301, as amended. 606~~

~~(6) "Home health service" means the following items and 607
services, provided, except as provided in division (A) (6) (g) of 608
this section, on a visiting basis in a place of residence used- 609
as the patient's home: 610~~

~~(a) Nursing care provided by or under the supervision of a 611
registered professional nurse; 612~~

~~(b) Physical, occupational, or speech therapy ordered by 613
the patient's attending physician; 614~~

~~(c) Medical social services performed by or under the 615
supervision of a qualified medical or psychiatric social worker- 616
and under the direction of the patient's attending physician; 617~~

~~(d) Personal health care of the patient performed by aides- 618
in accordance with the orders of a doctor of medicine or- 619
osteopathy and under the supervision of a registered- 620
professional nurse; 621~~

~~(e) Medical supplies and the use of medical appliances; 622~~

~~(f) Medical services of interns and residents in training under an approved teaching program of a nonprofit hospital and under the direction and supervision of the patient's attending physician;~~ 623
624
625
626

~~(g) Any of the foregoing items and services which:~~ 627

~~(i) Are provided on an outpatient basis under arrangements made by the home health agency at a hospital or skilled nursing facility;~~ 628
629
630

~~(ii) Involve the use of equipment of such a nature that the items and services cannot readily be made available to the patient in the patient's place of residence, or which are furnished at the hospital or skilled nursing facility while the patient is there to receive any item or service involving the use of such equipment.~~ 631
632
633
634
635
636

~~Any attorney, physician, osteopath, podiatrist, chiropractor, dentist, psychologist, any employee of a hospital as defined in section 3701.01 of the Revised Code, any nurse licensed under Chapter 4723. of the Revised Code, any employee of an ambulatory health facility, any employee of a home health agency, any employee of a residential facility licensed under section 5119.34 of the Revised Code that provides accommodations, supervision, and personal care services for three to sixteen unrelated adults, any employee of a nursing home, residential care facility, or home for the aging, as defined in section 3721.01 of the Revised Code, any senior service provider, any peace officer, coroner, member of the clergy, any employee of a community mental health facility, and any person engaged in professional counseling, social work, or marriage and family therapy~~ 637
638
639
640
641
642
643
644
645
646
647
648
649
650
(1) Any individual listed in 651
division (A) (2) of this section having reasonable cause to 652

believe that an adult is being abused, neglected, or exploited, 653
or is in a condition which is the result of abuse, neglect, or 654
exploitation shall immediately report such belief to the county 655
department of job and family services. ~~This section does not~~ 656
~~apply to employees of any hospital or public hospital as defined~~ 657
~~in section 5122.01 of the Revised Code.~~ 658

(2) All of the following are subject to division (A)(1) of 659
this section: 660

(a) An attorney admitted to the practice of law in this 661
state; 662

(b) An individual authorized under Chapter 4731. of the 663
Revised Code to practice medicine and surgery, osteopathic 664
medicine and surgery, or podiatric medicine and surgery; 665

(c) An individual licensed under Chapter 4734. of the 666
Revised Code as a chiropractor; 667

(d) An individual licensed under Chapter 4715. of the 668
Revised Code as a dentist; 669

(e) An individual licensed under Chapter 4723. of the 670
Revised Code as a registered nurse or licensed practical nurse; 671

(f) An individual licensed under Chapter 4732. of the 672
Revised Code as a psychologist; 673

(g) An individual licensed under Chapter 4757. of the 674
Revised Code as a social worker, independent social worker, 675
professional counselor, professional clinical counselor, 676
marriage and family therapist, or independent marriage and 677
family therapist; 678

(h) An individual licensed under Chapter 4729. of the 679
Revised Code as a pharmacist; 680

- (i) An individual holding a certificate to practice as a dialysis technician issued under Chapter 4723. of the Revised Code; 681
682
683
- (j) An employee of a home health agency, as defined in section 3701.881 of the Revised Code; 684
685
- (k) An employee of an outpatient health facility; 686
- (l) An employee of a hospital, as defined in section 3727.01 of the Revised Code; 687
688
- (m) An employee of a hospital or public hospital, as defined in section 5122.01 of the Revised Code; 689
690
- (n) An employee of a nursing home or residential care facility, as defined in section 3721.01 of the Revised Code; 691
692
- (o) An employee of a residential facility licensed under section 5119.22 of the Revised Code that provides accommodations, supervision, and personal care services for three to sixteen unrelated adults; 693
694
695
696
- (p) An employee of a health department operated by the board of health of a city or general health district or the authority having the duties of a board of health under section 3709.05 of the Revised Code; 697
698
699
700
- (q) An employee of a community mental health agency, as defined in section 5122.01 of the Revised Code; 701
702
- (r) An agent of a county humane society organized under section 1717.05 of the Revised Code; 703
704
- (s) An individual who is a firefighter for a lawfully constituted fire department; 705
706
- (t) An individual who is an ambulance driver for an 707

<u>emergency medical service organization, as defined in section</u>	708
<u>4765.01 of the Revised Code;</u>	709
<u>(u) A first responder, emergency medical technician-basic,</u>	710
<u>emergency medical technician-intermediate, or paramedic, as</u>	711
<u>those terms are defined in section 4765.01 of the Revised Code;</u>	712
<u>(v) An official employed by a local building department to</u>	713
<u>conduct inspections of houses and other residential buildings;</u>	714
<u>(w) A peace officer;</u>	715
<u>(x) A coroner;</u>	716
<u>(y) A member of the clergy;</u>	717
<u>(z) An individual who holds a certificate issued under</u>	718
<u>Chapter 4701. of the Revised Code as a certified public</u>	719
<u>accountant or is registered under that chapter as a public</u>	720
<u>accountant;</u>	721
<u>(aa) An individual licensed under Chapter 4735. of the</u>	722
<u>Revised Code as a real estate broker or real estate salesperson;</u>	723
<u>(bb) An individual appointed and commissioned under</u>	724
<u>section 147.01 of the Revised Code as a notary public;</u>	725
<u>(cc) An employee of a bank, savings bank, savings and loan</u>	726
<u>association, or credit union organized under the laws of this</u>	727
<u>state, another state, or the United States;</u>	728
<u>(dd) An investment advisor, as defined in section 1707.01</u>	729
<u>of the Revised Code;</u>	730
<u>(ee) A financial planner accredited by a national</u>	731
<u>accreditation agency;</u>	732
<u>(ff) Any other individual who is a senior service</u>	733
<u>provider.</u>	734

(B) Any person having reasonable cause to believe that an adult has suffered abuse, neglect, or exploitation may report, or cause ~~reports a report~~ to be made of such belief to the county department of job and family services.

(C) The reports made under this section shall be made orally or in writing except that oral reports shall be followed by a written report if a written report is requested by the department. Written reports shall include:

(1) The name, address, and approximate age of the adult who is the subject of the report;

(2) The name and address of the individual responsible for the adult's care, if any individual is, and if the individual is known;

(3) The nature and extent of the alleged abuse, neglect, or exploitation of the adult;

(4) The basis of the reporter's belief that the adult has been abused, neglected, or exploited.

(D) Any person with reasonable cause to believe that an adult is suffering abuse, neglect, or exploitation who makes a report pursuant to this section or who testifies in any administrative or judicial proceeding arising from such a report, or any employee of the state or any of its subdivisions who is discharging responsibilities under section 5101.62 of the Revised Code shall be immune from civil or criminal liability on account of such investigation, report, or testimony, except liability for perjury, unless the person has acted in bad faith or with malicious purpose.

(E) No employer or any other person with the authority to do so shall ~~discharge~~ do any of the following as a result of an

employee's having filed a report under this section: 764

(1) Discharge, demote, transfer, prepare a negative work 765
performance evaluation, ~~or reduce~~ ; 766

(2) Reduce benefits, pay, or work privileges, ~~or take~~ ; 767

(3) Take any other action detrimental to ~~an~~ the employee 768
or in any way retaliate against ~~an~~ the employee as a result of 769
the ~~employee's having filed a report under this section.~~ 770

(F) Neither the written or oral report provided for in 771
this section nor the investigatory report provided for in 772
section ~~5101.62~~ 5101.65 of the Revised Code shall be considered 773
a public record as defined in section 149.43 of the Revised 774
Code. ~~Information~~ On request, information contained in the 775
report shall ~~upon request~~ be made available to the adult who is 776
the subject of the report, to agencies authorized by the county 777
department of job and family services to receive information 778
contained in the report, and to legal counsel for the adult. If 779
it determines that there is a risk of harm to a person who makes 780
a report under this section or to the adult who is the subject 781
of the report, the county department of job and family services 782
may redact the name and identifying information related to the 783
person who made the report. 784

Sec. 5101.631. (A) Not later than two years after the 785
effective date of this section, the department of job and family 786
services may establish a registry to maintain reports of abuse, 787
neglect, or exploitation of adults, whether investigated or not, 788
made to county departments of job and family services under 789
section 5101.63 of the Revised Code. The department shall 790
release information in the registry to county departments of job 791
and family services in accordance with division (B) of section 792

5101.65 of the Revised Code and may release information in the 793
registry to law enforcement agencies through the Ohio law 794
enforcement gateway established under section 109.57 of the 795
Revised Code. 796

(B) Not later than six months after the effective date of 797
this section, the department shall submit to the president of 798
the senate, the speaker of the house of representatives, the 799
minority leader of the senate, the minority leader of the house 800
of representatives, and the elder abuse commission created under 801
section 5101.74 of the Revised Code a report outlining a process 802
for implementation of a registry under division (A) of this 803
section. The report shall include an estimate of the cost to the 804
department and county departments of implementing the registry. 805

Sec. 5101.632. Each entity that employs or is responsible 806
for licensing or regulating the individuals required under 807
section 5101.63 of the Revised Code to make reports of abuse, 808
neglect, or exploitation of adults shall ensure that the 809
individuals have access to the educational materials developed 810
under division (D) of section 5101.62 of the Revised Code. 811

Sec. ~~5101.611~~ 5101.64. If a county department of job and 812
family services knows or has reasonable cause to believe that 813
the subject of a report made under section ~~5101.61~~ 5101.63 of 814
the Revised Code or of an investigation conducted under ~~sections~~ 815
~~5101.62 to 5101.64~~ section 5101.65 of the Revised Code or on the 816
initiative of the county department is mentally retarded or 817
developmentally disabled as defined in section 5126.01 of the 818
Revised Code, the county department shall refer the case to the 819
county board of developmental disabilities of that county for 820
review pursuant to section 5126.31 of the Revised Code. 821

If a county board of developmental disabilities refers a 822

case to the county department of job and family services in 823
accordance with section 5126.31, the county department shall 824
proceed with the case in accordance with sections 5101.60 to 825
~~5101.71~~ 5101.72 of the Revised Code. 826

Sec. ~~5101.62~~ 5101.65. The county department of job and 827
family services shall be responsible for the investigation of 828
all reports provided for in section ~~5101.61~~ 5101.63 and all 829
cases referred to it under section 5126.31 of the Revised Code 830
and for evaluating the need for and, to the extent of available 831
funds, providing or arranging for the provision of protective 832
services. The department may designate another agency to perform 833
the department's duties under this section. 834

Investigation of the report provided for in section 835
~~5101.61~~ 5101.63 or a case referred to the department under 836
section 5126.31 of the Revised Code shall be initiated within 837
twenty-four hours after the department receives the report or 838
case if any emergency exists; otherwise investigation shall be 839
initiated within three working days. 840

Investigation of the need for protective services shall 841
include a face-to-face visit with the adult who is the subject 842
of the report, preferably in the adult's residence, and 843
consultation with the person who made the report, if feasible, 844
and agencies or persons who have information about the adult's 845
alleged abuse, neglect, or exploitation. 846

The department shall give written notice of the intent of 847
the investigation and an explanation of the notice in language 848
reasonably understandable to the adult who is the subject of the 849
investigation, at the time of the initial interview with that 850
person. 851

Upon completion of the investigation, the department shall 852
determine from its findings whether or not the adult who is the 853
subject of the report is in need of protective services. No 854
adult shall be determined to be abused, neglected, or in need of 855
protective services for the sole reason that, in lieu of medical 856
treatment, the adult relies on or is being furnished spiritual 857
treatment through prayer alone in accordance with the tenets and 858
practices of a church or religious denomination of which the 859
adult is a member or adherent. The department shall write a 860
report which confirms or denies the need for protective services 861
and states why it reached this conclusion. 862

Sec. ~~5101.63~~ 5101.651. If, during the course of an 863
investigation conducted under section ~~5101.62~~ 5101.65 of the 864
Revised Code, any person, including the adult who is the subject 865
of the investigation, denies or obstructs access to the 866
residence of the adult, the county department of job and family 867
services may file a petition in court for a temporary 868
restraining order to prevent the interference or obstruction. 869
The court shall issue a temporary restraining order to prevent 870
the interference or obstruction if it finds there is reasonable 871
cause to believe that the adult is being or has been abused, 872
neglected, or exploited and access to the person's residence has 873
been denied or obstructed. Such a finding is prima-facie 874
evidence that immediate and irreparable injury, loss, or damage 875
will result, so that notice is not required. After obtaining an 876
order restraining the obstruction of or interference with the 877
access of the protective services representative, the 878
representative may be accompanied to the residence by a peace 879
officer. 880

Sec. ~~5101.64~~ 5101.66. Any person who requests or consents 881
to receive protective services shall receive such services only 882

after an investigation and determination of a need for 883
protective services, ~~which~~. The investigation shall be 884
performed in the same manner as the investigation of a report 885
pursuant to ~~sections 5101.62 and 5101.63~~ section 5101.65 of the 886
Revised Code. If the person withdraws consent, the protective 887
services shall be terminated. 888

Sec. ~~5101.65~~ 5101.68. If the county department of job and 889
family services determines that an adult is in need of 890
protective services and is an incapacitated person, the 891
department may petition the court for an order authorizing the 892
provision of protective services. The petition shall state the 893
specific facts alleging the abuse, neglect, or exploitation and 894
shall include a proposed protective service plan. Any plan for 895
protective services shall be specified in the petition. 896

Sec. ~~5101.66~~ 5101.681. Notice of a petition for the 897
provision of court-ordered protective services as provided for 898
in section ~~5101.65~~ 5101.68 of the Revised Code shall be 899
personally served upon the adult who is the subject of the 900
petition at least five working days prior to the date set for 901
the hearing as provided in section ~~5101.67~~ 5101.682 of the 902
Revised Code. Notice shall be given orally and in writing in 903
language reasonably understandable to the adult. The notice 904
shall include the names of all petitioners, the basis of the 905
belief that protective services are needed, the rights of the 906
adult in the court proceedings, and the consequences of a court 907
order for protective services. The adult shall be informed of 908
~~his~~ the right to counsel and ~~his~~ the right to appointed counsel 909
if ~~he~~ the adult is indigent and if appointed counsel is 910
requested. Written notice by certified mail shall also be given 911
to the adult's guardian, legal counsel, caretaker, and spouse, 912
if any, or if ~~he~~ the adult has none of these, to ~~his~~ the adult's 913

adult children or next of kin, if any, or to any other person as 914
the court may require. The adult who is the subject of the 915
petition may not waive notice as provided in this section. 916

Sec. ~~5101.67~~ 5101.682. (A) The court shall hold a hearing 917
on the petition as provided in section ~~5101.65~~ 5101.68 of the 918
Revised Code within fourteen days after its filing. The adult 919
who is the subject of the petition shall have the right to be 920
present at the hearing, present evidence, and examine and cross- 921
examine witnesses. The adult shall be represented by counsel 922
unless the right to counsel is knowingly waived. If the adult is 923
indigent, the court shall appoint counsel to represent the 924
adult. If the court determines that the adult lacks the capacity 925
to waive the right to counsel, the court shall appoint counsel 926
to represent the adult's interests. 927

(B) If the court finds, on the basis of clear and 928
convincing evidence, that the adult has been abused, neglected, 929
or exploited, is in need of protective services, and is 930
incapacitated, and no person authorized by law or by court order 931
is available to give consent, it shall issue an order requiring 932
the provision of protective services only if they are available 933
locally. 934

(C) If the court orders placement under this section it 935
shall give consideration to the choice of residence of the 936
adult. The court may order placement in settings which have been 937
approved by the department of job and family services as meeting 938
at least minimum community standards for safety, security, and 939
the requirements of daily living. The court shall not order an 940
institutional placement unless it has made a specific finding 941
entered in the record that no less restrictive alternative can 942
be found to meet the needs of the individual. No individual may 943

be committed to a hospital or public hospital as defined in 944
section 5122.01 of the Revised Code pursuant to this section. 945

(D) The placement of an adult pursuant to court order as 946
provided in this section shall not be changed unless the court 947
authorized the transfer of placement after finding compelling 948
reasons to justify the transfer. Unless the court finds that an 949
emergency exists, the court shall notify the adult of a transfer 950
at least thirty days prior to the actual transfer. 951

(E) A court order provided for in this section shall 952
remain in effect for no longer than six months. Thereafter, the 953
county department of job and family services shall review the 954
adult's need for continued services and, if the department 955
determines that there is a continued need, it shall apply for a 956
renewal of the order for additional periods of no longer than 957
one year each. The adult who is the subject of the court-ordered 958
services may petition for modification of the order at any time. 959

Sec. ~~5101.68~~ 5101.69. (A) If an adult has consented to the 960
provision of protective services but any other person refuses to 961
allow such provision, the county department of ~~human~~ job and 962
family services may petition the court for a temporary 963
restraining order to restrain the person from interfering with 964
the provision of protective services for the adult. 965

(B) The petition shall state specific facts sufficient to 966
demonstrate the need for protective services, the consent of the 967
adult, and the refusal of some other person to allow the 968
provision of these services. 969

(C) Notice of the petition shall be given in language 970
reasonably understandable to the person alleged to be 971
interfering with the provision of services; 972

(D) The court shall hold a hearing on the petition within 973
fourteen days after its filing. If the court finds that the 974
protective services are necessary, that the adult has consented 975
to the ~~provisions~~provision of such services, and that the 976
person who is the subject of the petition has prevented such 977
provision, the court shall issue a temporary restraining order 978
to restrain the person from interfering with the provision of 979
protective services to the adult. 980

Sec. ~~5101.69~~5101.70. (A) Upon petition by the county 981
department of ~~human~~job and family services, the court may issue 982
an order authorizing the provision of protective services on an 983
emergency basis to an adult. The petition for any emergency 984
order shall include all of the following: 985

(1) The name, age, and address of the adult in need of 986
protective services; 987

(2) The nature of the emergency; 988

(3) The proposed protective services; 989

(4) The petitioner's reasonable belief, together with 990
facts supportive thereof, as to the existence of the 991
circumstances described in divisions (D) (1) to (3) of this 992
section; 993

(5) Facts showing the petitioner's attempts to obtain the 994
adult's consent to the protective services. 995

(B) Notice of the filing and contents of the petition 996
provided for in division (A) of this section, the rights of the 997
person in the hearing provided for in division (C) of this 998
section, and the possible consequences of a court order, shall 999
be given to the adult. Notice shall also be given to the spouse 1000
of the adult or, if ~~he~~the adult has none, to ~~his~~the adult's 1001

adult children or next of kin, and ~~his~~ the adult's guardian, if 1002
any, if ~~his~~ the guardian's whereabouts are known. The notice 1003
shall be given in language reasonably understandable to its 1004
recipients at least twenty-four hours prior to the hearing 1005
provided for in this section. The court may waive the twenty- 1006
four ~~hour~~ hours' notice ~~requiement~~ requirement upon a showing 1007
that both of the following are the case: 1008

(1) Immediate and irreparable physical harm or immediate 1009
and irreparable financial harm to the adult or others will 1010
result from the twenty-four hour delay; ~~and~~ 1011

(2) Reasonable attempts have been made to notify the 1012
adult, ~~his~~ the adult's spouse, or, if ~~he~~ the adult has none, ~~his~~- 1013
the adult's adult children or next of kin, if any, and ~~his~~ the 1014
adult's guardian, if any, if ~~his~~ the guardian's whereabouts are 1015
known. 1016

Notice of the court's determination shall be given to all 1017
persons receiving notice of the filing of the petition provided 1018
for in this division. 1019

(C) Upon receipt of a petition for an order for emergency 1020
services, the court shall hold a hearing no sooner than twenty- 1021
four and no later than seventy-two hours after the notice 1022
provided for in division (B) of this section has been given, 1023
unless the court has waived the notice. The adult who is the 1024
subject of the petition shall have the right to be present at 1025
the hearing, present, evidence, and examine and cross-examine 1026
witnesses. 1027

(D) The court shall issue an order authorizing the 1028
provision of protective services on an emergency basis if it 1029
finds, on the basis of clear and convincing evidence, ~~that~~ all 1030

<u>of the following:</u>	1031
(1) The adult is an incapacitated person;	1032
(2) An emergency exists;	1033
(3) No person authorized by law or court order to give consent for the adult is available or willing to consent to emergency services.	1034 1035 1036
(E) In issuing an emergency order, the court shall adhere to the following limitations:	1037 1038
(1) The court shall order only such protective services as are necessary and available locally to remove the conditions creating the emergency, and the court shall specifically designate those protective services the adult shall receive;	1039 1040 1041 1042
(2) The court shall not order any change of residence under this section unless the court specifically finds that a change of residence is necessary;	1043 1044 1045
(3) The court may order emergency services <u>services</u> only for fourteen days. The department may petition the court for a renewal of the order for a fourteen-day period upon a showing that continuation of the order is necessary to remove the emergency.	1046 1047 1048 1049 1050
(4) In its order the court shall authorize the director of the <u>county</u> department or his <u>the director's</u> designee to give consent for the person for the approved emergency services until the expiration of the order;	1051 1052 1053 1054
(5) The court shall not order a person to a hospital or public hospital as defined in section 5122.01 of the Revised Code.	1055 1056 1057

(F) If the county department determines that the adult 1058
continues to need protective services after the order provided 1059
for in division (D) of this section has expired, the department 1060
may petition the court for an order to continue protective 1061
services, pursuant to section ~~5101.65~~5101.68 of the Revised 1062
Code. After the filing of the petition, the department may 1063
continue to provide protective services pending a hearing by the 1064
court. 1065

Sec. 5101.701. (A) A court, through a probate judge or a 1066
magistrate under the direction of a probate judge, may issue by 1067
telephone an ex parte emergency order authorizing the provision 1068
of protective services, including the relief available under 1069
division (B) of section 5101.702 of the Revised Code, to an 1070
adult on an emergency basis if all of the following are the 1071
case: 1072

(1) The court receives notice from the county department 1073
of job and family services, or an authorized employee of the 1074
department, that the department or employee believes an 1075
emergency order is needed as described in this section. 1076

(2) There is reasonable cause to believe that the adult is 1077
incapacitated. 1078

(3) There is reasonable cause to believe that there is a 1079
substantial risk to the adult of immediate and irreparable 1080
physical harm, immediate and irreparable financial harm, or 1081
death. 1082

(B) (1) The judge or magistrate shall journalize any order 1083
issued under this section. 1084

(2) An order issued under this section shall be in effect 1085
for not longer than twenty-four hours, except that if the day 1086

following the day on which the order is issued is not a working 1087
day, the order shall remain in effect until the next working 1088
day. 1089

(C) (1) Except as provided in division (C) (2) of this 1090
section, not later than twenty-four hours after an order is 1091
issued under this section, a petition shall be filed with the 1092
court in accordance with division (A) of section 5101.70 of the 1093
Revised Code. 1094

(2) If the day following the day on which the order was 1095
issued is not a working day, the petition shall be filed with 1096
the court on the next working day. 1097

(3) Except as provided in section 5101.702 of the Revised 1098
Code, proceedings on the petition shall be conducted in 1099
accordance with section 5101.70 of the Revised Code. 1100

Sec. 5101.702. (A) If an order is issued pursuant to 1101
section 5101.701 of the Revised Code, the court shall hold a 1102
hearing not later than twenty-four hours after the issuance to 1103
determine whether there is probable cause for the order, except 1104
that if the day following the day on which the order is issued 1105
is not a working day, the court shall hold the hearing on the 1106
next working day. 1107

(B) At the hearing, the court: 1108

(1) Shall determine whether protective services are the 1109
least restrictive alternative available for meeting the adult's 1110
needs; 1111

(2) May issue temporary orders to protect the adult from 1112
immediate and irreparable physical harm or immediate and 1113
irreparable financial harm, including, but not limited to, 1114
temporary protection orders, evaluations, and orders requiring a 1115

party to vacate the adult's place of residence or legal settlement; 1116
1117

(3) May order emergency services; 1118

(4) May freeze the financial assets of the adult. 1119

(C) A temporary order issued pursuant to division (B) (2) of this section is effective for thirty days. The court may renew the order for an additional thirty-day period. 1120
1121
1122

Information contained in the order may be entered into the law enforcement automated data system. 1123
1124

Sec. 5101.70-5101.71. (A) If it appears that an adult in need of protective services has the financial means sufficient to pay for such services, the county department of job and family services shall make an evaluation regarding such means. If the evaluation establishes that the adult has such financial means, the department shall initiate procedures for reimbursement pursuant to rules ~~promulgated by the department~~ adopted under section 5101.61 of the Revised Code. If the evaluation establishes that the adult does not have such financial means, the services shall be provided in accordance with the policies and procedures established by the state department of job and family services for the provision of welfare assistance. An adult shall not be required to pay for court-ordered protective services unless the court determines upon a showing by the county department of job and family services that the adult is financially able to pay and the court orders the adult to pay. 1125
1126
1127
1128
1129
1130
1131
1132
1133
1134
1135
1136
1137
1138
1139
1140
1141

(B) Whenever the county department of job and family services has petitioned the court to authorize the provision of protective services and the adult who is the subject of the 1142
1143
1144

petition is indigent, the court shall appoint legal counsel. 1145

Sec. 5101.74. (A) There is hereby created the elder abuse 1146
commission. The commission shall consist of the following 1147
members: 1148

(1) The following members, appointed by the attorney 1149
general: 1150

(a) One representative of the AARP; 1151

(b) One representative of the buckeye state sheriffs' 1152
association; 1153

(c) One representative of the county commissioners' 1154
association of Ohio; 1155

(d) One representative of the Ohio association of area 1156
agencies on aging; 1157

(e) One representative of the board of nursing; 1158

(f) One representative of the Ohio coalition for adult 1159
protective services; 1160

(g) One person who represents the interests of elder abuse 1161
victims; 1162

(h) One person who represents the interests of elderly 1163
persons; 1164

(i) One representative of the Ohio domestic violence 1165
network; 1166

(j) One representative of the Ohio prosecuting attorneys 1167
association; 1168

(k) One representative of the Ohio victim witness 1169
association; 1170

<u>(l) One representative of the Ohio association of chiefs of police;</u>	1171
	1172
<u>(m) One representative of the Ohio association of probate judges;</u>	1173
	1174
<u>(n) One representative of the Ohio job and family services directors' association;</u>	1175
	1176
<u>(o) One representative of the Ohio bankers league;</u>	1177
<u>(p) One representative of the Ohio credit union league;</u>	1178
<u>(q) Two representatives of national organizations that focus on elder abuse or sexual violence.</u>	1179
	1180
<u>(2) The following ex officio members:</u>	1181
<u>(a) The attorney general or the attorney general's designee;</u>	1182
	1183
<u>(b) The chief justice of the supreme court of Ohio or the chief justice's designee;</u>	1184
	1185
<u>(c) The governor or the governor's designee;</u>	1186
<u>(d) The director of aging or the director's designee;</u>	1187
<u>(e) The director of job and family services or the director's designee;</u>	1188
	1189
<u>(f) The director of health or the director's designee;</u>	1190
<u>(g) The director of mental health and addiction services or the director's designee;</u>	1191
	1192
<u>(h) The director of developmental disabilities or the director's designee;</u>	1193
	1194
<u>(i) The superintendent of insurance or the</u>	1195

<u>superintendent's designee;</u>	1196
<u>(j) The director of public safety or the director's designee;</u>	1197
<u>(k) The state long-term care ombudsman or the ombudsman's designee;</u>	1199
<u>(l) One member of the house of representatives, appointed by the speaker of the house of representatives;</u>	1201
<u>(m) One member of the senate, appointed by the president of the senate.</u>	1203
<u>(B) Members who are appointed shall serve at the pleasure of the appointing authority. Vacancies shall be filled in the same manner as original appointments.</u>	1205
<u>(C) All members of the commission shall serve as voting members. The attorney general shall select from among the appointed members a chairperson. The commission shall meet at the call of the chairperson, but not less than four times per year. Special meetings may be called by the chairperson and shall be called by the chairperson at the request of the attorney general. The commission may establish its own quorum requirements and procedures regarding the conduct of meetings and other affairs.</u>	1208
<u>(D) Members shall serve without compensation, but may be reimbursed for mileage and other actual and necessary expenses incurred in the performance of their official duties.</u>	1217
<u>(E) Sections 101.82 to 101.87 of the Revised Code do not apply to the elder abuse commission.</u>	1220
<u>Sec. 5101.741.</u> (A) <u>The elder abuse commission shall formulate and recommend strategies on all of the following:</u>	1222
	1223

<u>(1) Increasing awareness of and improving education on</u>	1224
<u>elder abuse;</u>	1225
<u>(2) Increasing research on elder abuse;</u>	1226
<u>(3) Improving policy, funding, and programming related to</u>	1227
<u>elder abuse;</u>	1228
<u>(4) Improving the judicial response to elder abuse</u>	1229
<u>victims;</u>	1230
<u>(5) Identifying ways to coordinate statewide efforts to</u>	1231
<u>address elder abuse.</u>	1232
<u>(B) The commission shall review current funding of adult</u>	1233
<u>protective services and shall report on the cost to the state</u>	1234
<u>and county departments of job and family services of</u>	1235
<u>implementing its recommendations.</u>	1236
<u>(C) The commission shall prepare and issue a biennial</u>	1237
<u>report on a plan of action that may be used by local communities</u>	1238
<u>to aid in the development of efforts to combat elder abuse. The</u>	1239
<u>report shall include the commission's findings and</u>	1240
<u>recommendations made under divisions (A) and (B) of this</u>	1241
<u>section.</u>	1242
<u>(D) The attorney general may adopt rules as necessary for</u>	1243
<u>the commission to carry out its duties. The rules shall be</u>	1244
<u>adopted in accordance with section 111.15 of the Revised Code.</u>	1245
Sec. 5101.99. (A) Whoever violates division (A) or (B) of	1246
section 5101.61-5101.63 of the Revised Code shall be fined not	1247
more than five hundred dollars.	1248
(B) Whoever violates division (A) of section 5101.27 of	1249
the Revised Code is guilty of a misdemeanor of the first degree.	1250

(C) Whoever violates section 5101.133 of the Revised Code 1251
is guilty of a misdemeanor of the fourth degree. 1252

Sec. 5123.61. (A) As used in this section: 1253

(1) "Law enforcement agency" means the state highway 1254
patrol, the police department of a municipal corporation, or a 1255
county sheriff. 1256

(2) "Abuse" has the same meaning as in section 5123.50 of 1257
the Revised Code, except that it includes a misappropriation, as 1258
defined in that section. 1259

(3) "Neglect" has the same meaning as in section 5123.50 1260
of the Revised Code. 1261

(B) The department of developmental disabilities shall 1262
establish a registry office for the purpose of maintaining 1263
reports of abuse, neglect, and other major unusual incidents 1264
made to the department under this section and reports received 1265
from county boards of developmental disabilities under section 1266
5126.31 of the Revised Code. The department shall establish 1267
committees to review reports of abuse, neglect, and other major 1268
unusual incidents. 1269

(C) (1) Any person listed in division (C) (2) of this 1270
section, having reason to believe that a person with mental 1271
retardation or a developmental disability has suffered or faces 1272
a substantial risk of suffering any wound, injury, disability, 1273
or condition of such a nature as to reasonably indicate abuse or 1274
neglect of that person, shall immediately report or cause 1275
reports to be made of such information to the entity specified 1276
in this division. Except as provided in section 5120.173 of the 1277
Revised Code or as otherwise provided in this division, the 1278
person making the report shall make it to a law enforcement 1279

agency or to the county board of developmental disabilities. If 1280
the report concerns a resident of a facility operated by the 1281
department of developmental disabilities the report shall be 1282
made either to a law enforcement agency or to the department. If 1283
the report concerns any act or omission of an employee of a 1284
county board of developmental disabilities, the report 1285
immediately shall be made to the department and to the county 1286
board. 1287

(2) All of the following persons are required to make a 1288
report under division (C) (1) of this section: 1289

(a) Any physician, including a hospital intern or 1290
resident, any dentist, podiatrist, chiropractor, practitioner of 1291
a limited branch of medicine as specified in section 4731.15 of 1292
the Revised Code, hospital administrator or employee of a 1293
hospital, nurse licensed under Chapter 4723. of the Revised 1294
Code, employee of an ~~ambulatory~~ outpatient health facility as 1295
defined in section ~~5101.61~~ 5101.60 of the Revised Code, employee 1296
of a home health agency, employee of a residential facility 1297
licensed under section 5119.34 of the Revised Code that provides 1298
accommodations, supervision, and person care services for three 1299
to sixteen unrelated adults, or employee of a community mental 1300
health facility; 1301

(b) Any school teacher or school authority, licensed 1302
professional clinical counselor, licensed professional 1303
counselor, independent social worker, social worker, independent 1304
marriage and family therapist, marriage and family therapist, 1305
psychologist, attorney, peace officer, coroner, or residents' 1306
rights advocate as defined in section 3721.10 of the Revised 1307
Code; 1308

(c) A superintendent, board member, or employee of a 1309

county board of developmental disabilities; an administrator, 1310
board member, or employee of a residential facility licensed 1311
under section 5123.19 of the Revised Code; an administrator, 1312
board member, or employee of any other public or private 1313
provider of services to a person with mental retardation or a 1314
developmental disability, or any MR/DD employee, as defined in 1315
section 5123.50 of the Revised Code; 1316

(d) A member of a citizen's advisory council established 1317
at an institution or branch institution of the department of 1318
developmental disabilities under section 5123.092 of the Revised 1319
Code; 1320

(e) A member of the clergy who is employed in a position 1321
that includes providing specialized services to an individual 1322
with mental retardation or another developmental disability, 1323
while acting in an official or professional capacity in that 1324
position, or a person who is employed in a position that 1325
includes providing specialized services to an individual with 1326
mental retardation or another developmental disability and who, 1327
while acting in an official or professional capacity, renders 1328
spiritual treatment through prayer in accordance with the tenets 1329
of an organized religion. 1330

(3) (a) The reporting requirements of this division do not 1331
apply to employees of the Ohio protection and advocacy system. 1332

(b) An attorney or physician is not required to make a 1333
report pursuant to division (C) (1) of this section concerning 1334
any communication the attorney or physician receives from a 1335
client or patient in an attorney-client or physician-patient 1336
relationship, if, in accordance with division (A) or (B) of 1337
section 2317.02 of the Revised Code, the attorney or physician 1338
could not testify with respect to that communication in a civil 1339

or criminal proceeding, except that the client or patient is 1340
deemed to have waived any testimonial privilege under division 1341
(A) or (B) of section 2317.02 of the Revised Code with respect 1342
to that communication and the attorney or physician shall make a 1343
report pursuant to division (C)(1) of this section, if both of 1344
the following apply: 1345

(i) The client or patient, at the time of the 1346
communication, is a person with mental retardation or a 1347
developmental disability. 1348

(ii) The attorney or physician knows or suspects, as a 1349
result of the communication or any observations made during that 1350
communication, that the client or patient has suffered or faces 1351
a substantial risk of suffering any wound, injury, disability, 1352
or condition of a nature that reasonably indicates abuse or 1353
neglect of the client or patient. 1354

(4) Any person who fails to make a report required under 1355
division (C) of this section and who is an MR/DD employee, as 1356
defined in section 5123.50 of the Revised Code, shall be 1357
eligible to be included in the registry regarding 1358
misappropriation, abuse, neglect, or other specified misconduct 1359
by MR/DD employees established under section 5123.52 of the 1360
Revised Code. 1361

(D) The reports required under division (C) of this 1362
section shall be made forthwith by telephone or in person and 1363
shall be followed by a written report. The reports shall contain 1364
the following: 1365

(1) The names and addresses of the person with mental 1366
retardation or a developmental disability and the person's 1367
custodian, if known; 1368

(2) The age of the person with mental retardation or a developmental disability; 1369
1370

(3) Any other information that would assist in the investigation of the report. 1371
1372

(E) When a physician performing services as a member of the staff of a hospital or similar institution has reason to believe that a person with mental retardation or a developmental disability has suffered injury, abuse, or physical neglect, the physician shall notify the person in charge of the institution or that person's designated delegate, who shall make the necessary reports. 1373
1374
1375
1376
1377
1378
1379

(F) Any person having reasonable cause to believe that a person with mental retardation or a developmental disability has suffered or faces a substantial risk of suffering abuse or neglect may report or cause a report to be made of that belief to the entity specified in this division. Except as provided in section 5120.173 of the Revised Code or as otherwise provided in this division, the person making the report shall make it to a law enforcement agency or the county board of developmental disabilities. If the person is a resident of a facility operated by the department of developmental disabilities, the report shall be made to a law enforcement agency or to the department. If the report concerns any act or omission of an employee of a county board of developmental disabilities, the report immediately shall be made to the department and to the county board. 1380
1381
1382
1383
1384
1385
1386
1387
1388
1389
1390
1391
1392
1393
1394

(G) (1) Upon the receipt of a report concerning the possible abuse or neglect of a person with mental retardation or a developmental disability, the law enforcement agency shall inform the county board of developmental disabilities or, if the 1395
1396
1397
1398

person is a resident of a facility operated by the department of 1399
developmental disabilities, the department. 1400

(2) On receipt of a report under this section that 1401
includes an allegation of action or inaction that may constitute 1402
a crime under federal law or the law of this state, the 1403
department of developmental disabilities shall notify the law 1404
enforcement agency. 1405

(3) When a county board of developmental disabilities 1406
receives a report under this section that includes an allegation 1407
of action or inaction that may constitute a crime under federal 1408
law or the law of this state, the superintendent of the board or 1409
an individual the superintendent designates under division (H) 1410
of this section shall notify the law enforcement agency. The 1411
superintendent or individual shall notify the department of 1412
developmental disabilities when it receives any report under 1413
this section. 1414

(4) When a county board of developmental disabilities 1415
receives a report under this section and believes that the 1416
degree of risk to the person is such that the report is an 1417
emergency, the superintendent of the board or an employee of the 1418
board the superintendent designates shall attempt a face-to-face 1419
contact with the person with mental retardation or a 1420
developmental disability who allegedly is the victim within one 1421
hour of the board's receipt of the report. 1422

(H) The superintendent of the board may designate an 1423
individual to be responsible for notifying the law enforcement 1424
agency and the department when the county board receives a 1425
report under this section. 1426

(I) An adult with mental retardation or a developmental 1427

disability about whom a report is made may be removed from the 1428
adult's place of residence only by law enforcement officers who 1429
consider that the adult's immediate removal is essential to 1430
protect the adult from further injury or abuse or in accordance 1431
with the order of a court made pursuant to section 5126.33 of 1432
the Revised Code. 1433

(J) A law enforcement agency shall investigate each report 1434
of abuse or neglect it receives under this section. In addition, 1435
the department, in cooperation with law enforcement officials, 1436
shall investigate each report regarding a resident of a facility 1437
operated by the department to determine the circumstances 1438
surrounding the injury, the cause of the injury, and the person 1439
responsible. The investigation shall be in accordance with the 1440
memorandum of understanding prepared under section 5126.058 of 1441
the Revised Code. The department shall determine, with the 1442
registry office which shall be maintained by the department, 1443
whether prior reports have been made concerning an adult with 1444
mental retardation or a developmental disability or other 1445
principals in the case. If the department finds that the report 1446
involves action or inaction that may constitute a crime under 1447
federal law or the law of this state, it shall submit a report 1448
of its investigation, in writing, to the law enforcement agency. 1449
If the person with mental retardation or a developmental 1450
disability is an adult, with the consent of the adult, the 1451
department shall provide such protective services as are 1452
necessary to protect the adult. The law enforcement agency shall 1453
make a written report of its findings to the department. 1454

If the person is an adult and is not a resident of a 1455
facility operated by the department, the county board of 1456
developmental disabilities shall review the report of abuse or 1457
neglect in accordance with sections 5126.30 to 5126.33 of the 1458

Revised Code and the law enforcement agency shall make the 1459
written report of its findings to the county board. 1460

(K) Any person or any hospital, institution, school, 1461
health department, or agency participating in the making of 1462
reports pursuant to this section, any person participating as a 1463
witness in an administrative or judicial proceeding resulting 1464
from the reports, or any person or governmental entity that 1465
discharges responsibilities under sections 5126.31 to 5126.33 of 1466
the Revised Code shall be immune from any civil or criminal 1467
liability that might otherwise be incurred or imposed as a 1468
result of such actions except liability for perjury, unless the 1469
person or governmental entity has acted in bad faith or with 1470
malicious purpose. 1471

(L) No employer or any person with the authority to do so 1472
shall discharge, demote, transfer, prepare a negative work 1473
performance evaluation, reduce pay or benefits, terminate work 1474
privileges, or take any other action detrimental to an employee 1475
or retaliate against an employee as a result of the employee's 1476
having made a report under this section. This division does not 1477
preclude an employer or person with authority from taking action 1478
with regard to an employee who has made a report under this 1479
section if there is another reasonable basis for the action. 1480

(M) Reports made under this section are not public records 1481
as defined in section 149.43 of the Revised Code. Information 1482
contained in the reports on request shall be made available to 1483
the person who is the subject of the report, to the person's 1484
legal counsel, and to agencies authorized to receive information 1485
in the report by the department or by a county board of 1486
developmental disabilities. 1487

(N) Notwithstanding section 4731.22 of the Revised Code, 1488

the physician-patient privilege shall not be a ground for 1489
excluding evidence regarding the injuries or physical neglect of 1490
a person with mental retardation or a developmental disability 1491
or the cause thereof in any judicial proceeding resulting from a 1492
report submitted pursuant to this section. 1493

Sec. 5126.31. (A) A county board of developmental 1494
disabilities shall review reports of abuse and neglect made 1495
under section 5123.61 of the Revised Code and reports referred 1496
to it under section ~~5101.611~~ 5101.64 of the Revised Code to 1497
determine whether the person who is the subject of the report is 1498
an adult with mental retardation or a developmental disability 1499
in need of services to deal with the abuse or neglect. The board 1500
shall give notice of each report to the registry office of the 1501
department of developmental disabilities established pursuant to 1502
section 5123.61 of the Revised Code on the first working day 1503
after receipt of the report. If the report alleges that there is 1504
a substantial risk to the adult of immediate physical harm or 1505
death, the board shall initiate review within twenty-four hours 1506
of its receipt of the report. If the board determines that the 1507
person is sixty years of age or older but does not have mental 1508
retardation or a developmental disability, it shall refer the 1509
case to the county department of job and family services. If the 1510
board determines that the person is an adult with mental 1511
retardation or a developmental disability, it shall continue its 1512
review of the case. 1513

(B) For each review over which the board retains 1514
responsibility under division (A) of this section, it shall do 1515
all of the following: 1516

(1) Give both written and oral notice of the purpose of 1517
the review to the adult and, if any, to the adult's legal 1518

counsel or caretaker, in simple and clear language; 1519

(2) Visit the adult, in the adult's residence if possible, 1520
and explain the notice given under division (B)(1) of this 1521
section; 1522

(3) Request from the registry office any prior reports 1523
concerning the adult or other principals in the case; 1524

(4) Consult, if feasible, with the person who made the 1525
report under section ~~5101.61~~5101.63 or 5123.61 of the Revised 1526
Code and with any agencies or persons who have information about 1527
the alleged abuse or neglect; 1528

(5) Cooperate fully with the law enforcement agency 1529
responsible for investigating the report and for filing any 1530
resulting criminal charges and, on request, turn over evidence 1531
to the agency; 1532

(6) Determine whether the adult needs services, and 1533
prepare a written report stating reasons for the determination. 1534
No adult shall be determined to be abused, neglected, or in need 1535
of services for the sole reason that, in lieu of medical 1536
treatment, the adult relies on or is being furnished spiritual 1537
treatment through prayer alone in accordance with the tenets and 1538
practices of a church or religious denomination of which the 1539
adult is a member or adherent. 1540

(C) The board shall arrange for the provision of services 1541
for the prevention, correction or discontinuance of abuse or 1542
neglect or of a condition resulting from abuse or neglect for 1543
any adult who has been determined to need the services and 1544
consents to receive them. These services may include, but are 1545
not limited to, service and support administration, fiscal 1546
management, medical, mental health, home health care, homemaker, 1547

legal, and residential services and the provision of temporary 1548
accommodations and necessities such as food and clothing. The 1549
services do not include acting as a guardian, trustee, or 1550
protector as defined in section 5123.55 of the Revised Code. If 1551
the provision of residential services would require expenditures 1552
by the department of developmental disabilities, the board shall 1553
obtain the approval of the department prior to arranging the 1554
residential services. 1555

To arrange services, the board shall: 1556

(1) Develop an individualized service plan identifying the 1557
types of services required for the adult, the goals for the 1558
services, and the persons or agencies that will provide them; 1559

(2) In accordance with rules established by the director 1560
of developmental disabilities, obtain the consent of the adult 1561
or the adult's guardian to the provision of any of these 1562
services and obtain the signature of the adult or guardian on 1563
the individual service plan. An adult who has been found 1564
incompetent under Chapter 2111. of the Revised Code may consent 1565
to services. If the board is unable to obtain consent, it may 1566
seek, if the adult is incapacitated, a court order pursuant to 1567
section 5126.33 of the Revised Code authorizing the board to 1568
arrange these services. 1569

(D) The board shall ensure that the adult receives the 1570
services arranged by the board from the provider and shall have 1571
the services terminated if the adult withdraws consent. 1572

(E) On completion of a review, the board shall submit a 1573
written report to the registry office established under section 1574
5123.61 of the Revised Code. If the report includes a finding 1575
that a person with mental retardation or a developmental 1576

disability is a victim of action or inaction that may constitute 1577
a crime under federal law or the law of this state, the board 1578
shall submit the report to the law enforcement agency 1579
responsible for investigating the report. Reports prepared under 1580
this section are not public records as defined in section 149.43 1581
of the Revised Code. 1582

Section 2. That existing sections 173.501, 173.521, 1583
173.542, 2317.54, 4715.36, 5101.60, 5101.61, 5101.611, 5101.62, 1584
5101.63, 5101.64, 5101.66, 5101.67, 5101.68, 5101.69, 5101.70, 1585
5101.71, 5101.99, 5123.61, and 5126.31 of the Revised Code are 1586
hereby repealed. 1587

Section 3. Section 5123.61 of the Revised Code is 1588
presented in this act as a composite of the section as amended 1589
by both Sub. H.B. 232 and Am. Sub. H.B. 483 of the 130th General 1590
Assembly. The General Assembly, applying the principle stated in 1591
division (B) of section 1.52 of the Revised Code that amendments 1592
are to be harmonized if reasonably capable of simultaneous 1593
operation, finds that the composite is the resulting version of 1594
the section in effect prior to the effective date of the section 1595
as presented in this act. 1596