

**As Introduced**

**131st General Assembly**

**Regular Session**

**2015-2016**

**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 program is appropriate for the individual and the individual would rather participate in the PACE program than continue or begin to reside in a nursing facility, the PACE provider shall so notify the department of aging. On receipt of the notice from the PACE provider, the department of aging shall approve the individual's enrollment in the PACE program in accordance with priorities established in rules adopted under section 173.50 of the Revised Code.

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

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

(2) At least one of the following applies:

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

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

(c) The individual has been hospitalized and a physician

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~~3701.881 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
<b>Sec. 5101.60.</b> 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
<del>(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</del>	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 furnished to an adult in an emergency.

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

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

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

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

(3) By deception;

(4) By threat;

(5) By intimidation.

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

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

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  
hospital, but which is organized and operated to provide medical  
care to outpatients;~~ 537  
538  
539

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

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

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

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

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

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

of the following: 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 1034  
consent for the adult is available or willing to consent to 1035  
emergency services. 1036

(E) In issuing an emergency order, the court shall adhere 1037  
to the following limitations: 1038

(1) The court shall order only such protective services as 1039  
are necessary and available locally to remove the conditions 1040  
creating the emergency, and the court shall specifically 1041  
designate those protective services the adult shall receive; 1042

(2) The court shall not order any change of residence 1043  
under this section unless the court specifically finds that a 1044  
change of residence is necessary; 1045

(3) The court may order emergency ~~services~~ services only 1046  
for fourteen days. The department may petition the court for a 1047  
renewal of the order for a fourteen-day period upon a showing 1048  
that continuation of the order is necessary to remove the 1049  
emergency. 1050

(4) In its order the court shall authorize the director of 1051  
the county department or ~~his~~ the director's designee to give 1052  
consent for the person for the approved emergency services until 1053  
the expiration of the order; 1054

(5) The court shall not order a person to a hospital or 1055  
public hospital as defined in section 5122.01 of the Revised 1056  
Code. 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) Two representatives of national organizations that focus on elder abuse or sexual violence.</u>	1177
	1178
<u>(2) The following ex officio members:</u>	1179
<u>(a) The attorney general or the attorney general's designee;</u>	1180
	1181
<u>(b) The chief justice of the supreme court of Ohio or the chief justice's designee;</u>	1182
	1183
<u>(c) The governor or the governor's designee;</u>	1184
<u>(d) The director of aging or the director's designee;</u>	1185
<u>(e) The director of job and family services or the director's designee;</u>	1186
	1187
<u>(f) The director of health or the director's designee;</u>	1188
<u>(g) The director of mental health or the director's designee;</u>	1189
	1190
<u>(h) The director of alcohol and drug addiction services or the director's designee;</u>	1191
	1192
<u>(i) The director of developmental disabilities or the director's designee;</u>	1193
	1194
<u>(j) The superintendent of insurance or the superintendent's designee;</u>	1195
	1196

<u>(k) The director of public safety or the director's</u>	1197
<u>designee;</u>	1198
<u>(l) The state long-term care ombudsman or the ombudsman's</u>	1199
<u>designee;</u>	1200
<u>(m) One member of the house of representatives, appointed</u>	1201
<u>by the speaker of the house of representatives;</u>	1202
<u>(n) One member of the senate, appointed by the president</u>	1203
<u>of the senate.</u>	1204
<u>(B) Members who are appointed shall serve at the pleasure</u>	1205
<u>of the appointing authority. Vacancies shall be filled in the</u>	1206
<u>same manner as original appointments.</u>	1207
<u>(C) All members of the commission shall serve as voting</u>	1208
<u>members. The attorney general shall select from among the</u>	1209
<u>appointed members a chairperson. The commission shall meet at</u>	1210
<u>the call of the chairperson, but not less than four times per</u>	1211
<u>year. Special meetings may be called by the chairperson and</u>	1212
<u>shall be called by the chairperson at the request of the</u>	1213
<u>attorney general. The commission may establish its own quorum</u>	1214
<u>requirements and procedures regarding the conduct of meetings</u>	1215
<u>and other affairs.</u>	1216
<u>(D) Members shall serve without compensation, but may be</u>	1217
<u>reimbursed for mileage and other actual and necessary expenses</u>	1218
<u>incurred in the performance of their official duties.</u>	1219
<u>(E) Sections 101.82 to 101.87 of the Revised Code do not</u>	1220
<u>apply to the elder abuse commission.</u>	1221
<b><u>Sec. 5101.741.</u></b> (A) <u>The elder abuse commission shall</u>	1222
<u>formulate and recommend strategies on all of the following:</u>	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 elder abuse;</u>	1227 1228
<u>(4) Improving the judicial response to elder abuse victims;</u>	1229 1230
<u>(5) Identifying ways to coordinate statewide efforts to address elder abuse.</u>	1231 1232
<u>(B) The commission shall review current funding of adult protective services and shall report on the cost to the state and county departments of job and family services of implementing its recommendations.</u>	1233 1234 1235 1236
<u>(C) The commission shall prepare and issue a biennial report on a plan of action that may be used by local communities to aid in the development of efforts to combat elder abuse. The report shall include the commission's findings and recommendations made under divisions (A) and (B) of this section.</u>	1237 1238 1239 1240 1241 1242
<u>(D) The attorney general may adopt rules as necessary for the commission to carry out its duties. The rules shall be adopted in accordance with section 111.15 of the Revised Code.</u>	1243 1244 1245
<b>Sec. 5101.99.</b> (A) Whoever violates division (A) <del>or (B)</del> of section <del>5101.61</del> <u>5101.63</u> of the Revised Code shall be fined not more than five hundred dollars.	1246 1247 1248
(B) Whoever violates division (A) of section 5101.27 of the Revised Code is guilty of a misdemeanor of the first degree.	1249 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 1369



developmental disability; 1370

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

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

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

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