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**131st General Assembly**

**Regular Session**

**2015-2016**

**Am. H. B. No. 24**

**Representatives Dovilla, Retherford**

**Cosponsors: Representatives Anielski, Antonio, Derickson, Dever, Duffey, Fedor, Kraus, Maag, Manning, Sprague, Thompson, Baker, Blessing, Boose, Boyce, Boyd, Brenner, Brown, Buchy, Burkley, Celebrezze, Conditt, Craig, DeVitis, Driehaus, Ginter, Gonzales, Green, Grossman, Hackett, Hall, Hambley, Henne, Johnson, T., Koehler, Kunze, Landis, LaTourette, Leland, McClain, McColley, O'Brien, M., O'Brien, S., Patterson, Pelanda, Perales, Phillips, Ramos, Rezabek, Rogers, Ruhl, Schaffer, Scherer, Schuring, Sears, Sheehy, Slaby, Slesnick, Smith, K., Smith, R., Stinziano, Terhar, Young, Speaker Rosenberger**

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**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 individual is enrolled in home and community-based services such as the PACE 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 individual is enrolled in home and community-based services such as the PACE program, the individual is to be transported directly from the hospital to a nursing facility and admitted.

(d) Both of the following apply:

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

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

(C) Each month, the department of aging shall identify individuals who are eligible for the home first component of the PACE program. When the department identifies such an individual, the department shall notify the PACE provider serving the area in which the individual resides. The PACE provider shall determine whether the PACE program is appropriate for the

individual and whether the individual would rather participate 74  
in the PACE program than continue or begin to reside in a 75  
nursing facility. If the PACE provider determines that the PACE 76  
program is appropriate for the individual and the individual 77  
would rather participate in the PACE program than continue or 78  
begin to reside in a nursing facility, the PACE provider shall 79  
so notify the department of aging. On receipt of the notice from 80  
the PACE provider, the department of aging shall approve the 81  
individual's enrollment in the PACE program in accordance with 82  
priorities established in rules adopted under section 173.50 of 83  
the Revised Code. 84

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

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

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

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

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

physician's determination. 103

(c) The individual has been hospitalized and a physician 104  
has determined and documented in writing that, unless the 105  
individual is enrolled in home and community-based services such 106  
as the PASSPORT program, the individual is to be transported 107  
directly from the hospital to a nursing facility and admitted. 108

(d) Both of the following apply: 109

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

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

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

determines that the PASSPORT program is appropriate for the individual and the individual would rather participate in the PASSPORT program than continue or begin to reside in a nursing facility, the administrator shall so notify the department of aging. On receipt of the notice from the administrator, the department shall approve the individual's enrollment in the medicaid-funded component of the PASSPORT program regardless of the unified waiting list established under section 173.55 of the Revised Code, unless the enrollment would cause the component to exceed any limit on the number of individuals who may be enrolled in the component as set by the United States secretary of health and human services in the PASSPORT waiver.

**Sec. 173.542.** (A) Unless the medicaid-funded component of the assisted living program is terminated pursuant to division (C) of section 173.54 of the Revised Code, the department of aging shall establish a home first component of the assisted living program under which eligible individuals may be enrolled in the medicaid-funded component of the assisted living program in accordance with this section. An individual is eligible for the assisted living 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 assisted living 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 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	284
chapter to practice dentistry.	285
(E) "Dental hygienist" means an individual licensed under	286
this chapter to practice as a dental hygienist.	287
(F) "Dental hygiene services" means the prophylactic,	288
preventive, and other procedures that dentists are authorized by	289
this chapter and rules of the state dental board to assign to	290
dental hygienists, except for procedures while a patient is	291
anesthetized, definitive root planing, definitive subgingival	292
curettage, the administration of local anesthesia, and the	293
procedures specified in rules adopted by the board as described	294
in division (C) (4) of section 4715.22 of the Revised Code.	295
(G) "Facility" means any of the following:	296
(1) A health care facility, as defined in section 4715.22	297
of the Revised Code;	298
(2) A state correctional institution, as defined in	299
section 2967.01 of the Revised Code;	300
(3) A comprehensive child development program that	301
receives funds distributed under the "Head Start Act," 95 Stat.	302
499 (1981), 42 U.S.C. 9831, as amended, and is licensed as a	303
child day-care center;	304
(4) A residential facility licensed under section 5123.19	305
of the Revised Code;	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;

(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;

(7) A federally qualified health center or federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;

(8) A shelter for victims of domestic violence, as defined in section 3113.33 of the Revised Code;

(9) A facility operated by the department of youth services under Chapter 5139. of the Revised Code;

(10) A foster home, as defined in section 5103.02 of the Revised Code;

(11) A nonprofit clinic, as defined in section 3715.87 of the Revised Code;

(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;

(13) A dispensary;

(14) A health care facility, such as a clinic or hospital, of the United States department of veterans affairs;

(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; 334

(16) A facility operated by the board of health of a city 335  
or general health district or the authority having the duties of 336  
a board of health under section 3709.05 of the Revised Code; 337

(17) A women, infants, and children clinic; 338

(18) A mobile dental unit located at any location listed 339  
in divisions (G) (1) to (17) of this section; 340

(19) Any other location, as specified by the state dental 341  
board in rules adopted under section 4715.372 of the Revised 342  
Code, that is in an area designated as a dental health resource 343  
shortage area pursuant to section 3702.87 of the Revised Code 344  
and provides health care services to individuals who are 345  
medicaid recipients and to indigent and uninsured persons, as 346  
defined in section 2305.234 of the Revised Code. 347

**Sec. 5101.60.** As used in sections 5101.60 to 5101.71 of 348  
the Revised Code: 349

(A) "Abandonment" means desertion of an adult by a 350  
caretaker without having made provision for transfer of the 351  
adult's care. 352

(B) "Abuse" means the infliction upon an adult by self or 353  
others of injury, unreasonable confinement, intimidation, or 354  
cruel punishment with resulting physical harm, pain, or mental 355  
anguish. 356

~~(B)~~ (C) "Adult" means any person sixty years of age or 357  
older within this state who is handicapped by the infirmities of 358  
aging or who has a physical or mental impairment which prevents 359  
the person from providing for the person's own care or 360  
protection, and who resides in an independent living 361

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

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

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

- (1) On a voluntary basis, ~~by~~ ;
- (2) By contract, ~~through~~ ;
- (3) Through receipt of payment for care, ~~as~~ ;
- (4) As a result of a family relationship, ~~or by~~ ;
- (5) By order of a court of competent jurisdiction.

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

(G) "Court" means the probate court in the county where an

adult resides. 390

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

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

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

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

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

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

(3) By deception; 409

(4) By threat; 410

(5) By intimidation. 411

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

~~(I)~~ (M) "Incapacitated person" means a person who is 417  
impaired for any reason to the extent that the person lacks 418  
sufficient understanding or capacity to make and carry out 419  
reasonable decisions concerning the person's self or resources, 420  
with or without the assistance of a caretaker. Refusal to 421  
consent to the provision of services shall not be the sole 422  
determinative that the person is incapacitated. ~~"Reasonable-~~ 423  
~~decisions"~~ are decisions made in daily living which facilitate 424  
~~the provision of food, shelter, clothing, and health care-~~ 425  
~~necessary for life support.~~ 426

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

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

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

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

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

services; 446

(3) Abandonment. 447

~~(L)~~(Q) "Outpatient health facility" means a facility 448  
where medical care and preventive, diagnostic, therapeutic, 449  
rehabilitative, or palliative items or services are provided to 450  
outpatients by or under the direction of a physician or dentist. 451

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

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

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

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

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

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

**Sec. ~~5101.71~~ 5101.61.** (A) The county departments of job and family services shall implement sections 5101.60 to 5101.71 of the Revised Code. ~~The department of job and family services may provide a program of ongoing, comprehensive, formal training to county departments and other agencies authorized to implement sections 5101.60 to 5101.71 of the Revised Code. Training shall not be limited to the procedures for implementing section 5101.62 of the Revised Code.~~

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

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

The director shall adopt internal management rules in

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, rehabilitative, or palliative items or services furnished to an outpatient or ambulatory patient, by or under the direction of a 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;~~ 534  
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~~(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  
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~~(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  
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~~(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  
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~~(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~~ 558  
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~~operations;~~ 562

~~(g) Provides approved methods and procedures for the  
dispensing and administration of drugs and biologicals;~~ 563  
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~~(h) Has established an accounting and record keeping  
system to determine reasonable and allowable costs;~~ 565  
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~~(i) "Ambulatory health facilities" also includes an  
alcoholism treatment facility approved by the joint commission  
on accreditation of healthcare organizations as an alcoholism  
treatment facility or certified by the department of mental  
health and addiction services, and such facility shall comply  
with other provisions of this division not inconsistent with  
such accreditation or certification.~~ 567  
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~~(3) "Community mental health facility" means a facility  
which provides community mental health services and is included  
in the comprehensive mental health plan for the alcohol, drug  
addiction, and mental health service district in which it is  
located.~~ 574  
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~~(4) "Community mental health service" means services,  
other than inpatient services, provided by a community mental  
health facility.~~ 579  
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~~(5) "Home health agency" means an institution or a  
distinct part of an institution operated in this state which:~~ 582  
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~~(a) Is primarily engaged in providing home health  
services;~~ 584  
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~~(b) Has home health policies which are established by a  
group of professional personnel, including one or more duly  
licensed doctors of medicine or osteopathy and one or more  
registered professional nurses, to govern the home health~~ 586  
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~~services it provides and which includes a requirement that every patient must be under the care of a duly licensed doctor of medicine or osteopathy;~~ 590  
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~~(c) Is under the supervision of a duly licensed doctor of medicine or doctor of osteopathy or a registered professional nurse who is responsible for the execution of such home health policies;~~ 593  
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~~(d) Maintains comprehensive records on all patients;~~ 597

~~(e) Is operated by the state, a political subdivision, or an agency of either, or is operated not for profit in this state and is licensed or registered, if required, pursuant to law by the appropriate department of the state, county, or municipality in which it furnishes services; or is operated for profit in this state, meets all the requirements specified in divisions (A) (5) (a) to (d) of this section, and is certified under Title XVIII of the "Social Security Act," 49 Stat. 620 (1935), 42 U.S.C. 301, as amended.~~ 598  
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~~(6) "Home health service" means the following items and services, provided, except as provided in division (A) (6) (g) of this section, on a visiting basis in a place of residence used as the patient's home:~~ 607  
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~~(a) Nursing care provided by or under the supervision of a registered professional nurse;~~ 611  
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~~(b) Physical, occupational, or speech therapy ordered by the patient's attending physician;~~ 613  
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~~(c) Medical social services performed by or under the supervision of a qualified medical or psychiatric social worker and under the direction of the patient's attending physician;~~ 615  
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~~(d) Personal health care of the patient performed by aides in accordance with the orders of a doctor of medicine or osteopathy and under the supervision of a registered professional nurse;~~ 618  
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~~(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  
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~~(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  
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~~(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  
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~~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~~ 637  
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~~defined in section 3721.01 of the Revised Code, any senior- 647  
service provider, any peace officer, coroner, member of the- 648  
clergy, any employee of a community mental health facility, and- 649  
any person engaged in professional counseling, social work, or- 650  
marriage and family therapy (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 681  
dialysis technician issued under Chapter 4723. of the Revised 682  
Code; 683

(j) An employee of a home health agency, as defined in 684  
section 3701.881 of the Revised Code; 685

(k) An employee of an outpatient health facility; 686

(l) An employee of a hospital, as defined in section 687  
3727.01 of the Revised Code; 688

(m) An employee of a hospital or public hospital, as 689  
defined in section 5122.01 of the Revised Code; 690

(n) An employee of a nursing home or residential care 691  
facility, as defined in section 3721.01 of the Revised Code; 692

(o) An employee of a residential facility licensed under 693  
section 5119.22 of the Revised Code that provides 694  
accommodations, supervision, and personal care services for 695  
three to sixteen unrelated adults; 696

(p) An employee of a health department operated by the 697  
board of health of a city or general health district or the 698  
authority having the duties of a board of health under section 699  
3709.05 of the Revised Code; 700

(q) An employee of a community mental health agency, as 701

<u>defined in section 5122.01 of the Revised Code;</u>	702
<u>(r) An agent of a county humane society organized under section 1717.05 of the Revised Code;</u>	703 704
<u>(s) An individual who is a firefighter for a lawfully constituted fire department;</u>	705 706
<u>(t) An individual who is an ambulance driver for an emergency medical service organization, as defined in section 4765.01 of the Revised Code;</u>	707 708 709
<u>(u) A first responder, emergency medical technician-basic, emergency medical technician-intermediate, or paramedic, as those terms are defined in section 4765.01 of the Revised Code;</u>	710 711 712
<u>(v) An official employed by a local building department to conduct inspections of houses and other residential buildings;</u>	713 714
<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 Chapter 4701. of the Revised Code as a certified public accountant or is registered under that chapter as a public accountant;</u>	718 719 720 721
<u>(aa) An individual licensed under Chapter 4735. of the Revised Code as a real estate broker or real estate salesperson;</u>	722 723
<u>(bb) An individual appointed and commissioned under section 147.01 of the Revised Code as a notary public;</u>	724 725
<u>(cc) An employee of a bank, savings bank, savings and loan association, or credit union organized under the laws of this state, another state, or the United States;</u>	726 727 728

<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	735
adult has suffered abuse, neglect, or exploitation may report,	736
or cause <del>reports</del> <u>a report</u> to be made of such belief to the	737
<u>county department of job and family services.</u>	738
(C) The reports made under this section shall be made	739
orally or in writing except that oral reports shall be followed	740
by a written report if a written report is requested by the	741
department. Written reports shall include:	742
(1) The name, address, and approximate age of the adult	743
who is the subject of the report;	744
(2) The name and address of the individual responsible for	745
the adult's care, if any individual is, and if the individual is	746
known;	747
(3) The nature and extent of the alleged abuse, neglect,	748
or exploitation of the adult;	749
(4) The basis of the reporter's belief that the adult has	750
been abused, neglected, or exploited.	751
(D) Any person with reasonable cause to believe that an	752
adult is suffering abuse, neglect, or exploitation who makes a	753
report pursuant to this section or who testifies in any	754
administrative or judicial proceeding arising from such a	755
report, or any employee of the state or any of its subdivisions	756

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:

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

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

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

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

Sec. 5101.631. (A) Not later than two years after the

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 demonstrate the need for protective services, the consent of the adult, and the refusal of some other person to allow the provision of these services.

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

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

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

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

(2) The nature of the emergency;

(3) The proposed protective services;

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

(5) Facts showing the petitioner's attempts to obtain the adult's consent to the protective services. 994  
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 the county department or ~~his~~ the director's designee to give consent for the person for the approved emergency services until the expiration of the order;

(5) The court shall not order a person to a hospital or public hospital as defined in section 5122.01 of the Revised Code.

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

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

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

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

(3) There is reasonable cause to believe that there is a

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 1116  
settlement; 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) 1120  
of this section is effective for thirty days. The court may 1121  
renew the order for an additional thirty-day period. 1122

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

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

court-ordered protective services unless the court determines 1138  
upon a showing by the county department of job and family 1139  
services that the adult is financially able to pay and the court 1140  
orders the adult to pay. 1141

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

<u>(i) One representative of the Ohio domestic violence network;</u>	1165 1166
<u>(j) One representative of the Ohio prosecuting attorneys association;</u>	1167 1168
<u>(k) One representative of the Ohio victim witness association;</u>	1169 1170
<u>(l) One representative of the Ohio association of chiefs of police;</u>	1171 1172
<u>(m) One representative of the Ohio association of probate judges;</u>	1173 1174
<u>(n) One representative of the Ohio job and family services directors' association;</u>	1175 1176
<u>(o) One representative of the Ohio bankers league;</u>	1177
<u>(p) One representative of the Ohio credit union league;</u>	1178
<u>(q) Two representatives of national organizations that focus on elder abuse or sexual violence.</u>	1179 1180
<u>(2) The following ex officio members:</u>	1181
<u>(a) The attorney general or the attorney general's designee;</u>	1182 1183
<u>(b) The chief justice of the supreme court of Ohio or the chief justice's designee;</u>	1184 1185
<u>(c) The governor or the governor's designee;</u>	1186
<u>(d) The director of aging or the director's designee;</u>	1187
<u>(e) The director of job and family services or the director's designee;</u>	1188 1189

<u>(f) The director of health or the director's designee;</u>	1190
<u>(g) The director of mental health and addiction services</u> <u>or the director's designee;</u>	1191 1192
<u>(h) The director of developmental disabilities or the</u> <u>director's designee;</u>	1193 1194
<u>(i) The superintendent of insurance or the</u> <u>superintendent's designee;</u>	1195 1196
<u>(j) The director of public safety or the director's</u> <u>designee;</u>	1197 1198
<u>(k) The state long-term care ombudsman or the ombudsman's</u> <u>designee;</u>	1199 1200
<u>(l) One member of the house of representatives, appointed</u> <u>by the speaker of the house of representatives;</u>	1201 1202
<u>(m) One member of the senate, appointed by the president</u> <u>of the senate.</u>	1203 1204
<u>(B) Members who are appointed shall serve at the pleasure</u> <u>of the appointing authority. Vacancies shall be filled in the</u> <u>same manner as original appointments.</u>	1205 1206 1207
<u>(C) All members of the commission shall serve as voting</u> <u>members. The attorney general shall select from among the</u> <u>appointed members a chairperson. The commission shall meet at</u> <u>the call of the chairperson, but not less than four times per</u> <u>year. Special meetings may be called by the chairperson and</u> <u>shall be called by the chairperson at the request of the</u> <u>attorney general. The commission may establish its own quorum</u> <u>requirements and procedures regarding the conduct of meetings</u> <u>and other affairs.</u>	1208 1209 1210 1211 1212 1213 1214 1215 1216

(D) Members shall serve without compensation, but may be 1217  
reimbursed for mileage and other actual and necessary expenses 1218  
incurred in the performance of their official duties. 1219

(E) Sections 101.82 to 101.87 of the Revised Code do not 1220  
apply to the elder abuse commission. 1221

**Sec. 5101.741.** (A) The elder abuse commission shall 1222  
formulate and recommend strategies on all of the following: 1223

(1) Increasing awareness of and improving education on 1224  
elder abuse; 1225

(2) Increasing research on elder abuse; 1226

(3) Improving policy, funding, and programming related to 1227  
elder abuse; 1228

(4) Improving the judicial response to elder abuse 1229  
victims; 1230

(5) Identifying ways to coordinate statewide efforts to 1231  
address elder abuse. 1232

(B) The commission shall review current funding of adult 1233  
protective services and shall report on the cost to the state 1234  
and county departments of job and family services of 1235  
implementing its recommendations. 1236

(C) The commission shall prepare and issue a biennial 1237  
report on a plan of action that may be used by local communities 1238  
to aid in the development of efforts to combat elder abuse. The 1239  
report shall include the commission's findings and 1240  
recommendations made under divisions (A) and (B) of this 1241  
section. 1242

(D) The attorney general may adopt rules as necessary for 1243

the commission to carry out its duties. The rules shall be 1244  
adopted in accordance with section 111.15 of the Revised Code. 1245

**Sec. 5101.99.** (A) Whoever violates division (A) ~~or (B)~~ of 1246  
section ~~5101.61~~ 5101.63 of the Revised Code shall be fined not 1247  
more than five hundred dollars. 1248

(B) Whoever violates division (A) of section 5101.27 of 1249  
the Revised Code is guilty of a misdemeanor of the first degree. 1250

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

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

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

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

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

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

(C) (1) Any person listed in division (C) (2) of this 1270  
section, having reason to believe that a person with mental 1271

retardation or a developmental disability has suffered or faces 1272  
a substantial risk of suffering any wound, injury, disability, 1273  
or condition of such a nature as to reasonably indicate abuse or 1274  
neglect of that person, shall immediately report or cause 1275  
reports to be made of such information to the entity specified 1276  
in this division. Except as provided in section 5120.173 of the 1277  
Revised Code or as otherwise provided in this division, the 1278  
person making the report shall make it to a law enforcement 1279  
agency or to the county board of developmental disabilities. If 1280  
the report concerns a resident of a facility operated by the 1281  
department of developmental disabilities the report shall be 1282  
made either to a law enforcement agency or to the department. If 1283  
the report concerns any act or omission of an employee of a 1284  
county board of developmental disabilities, the report 1285  
immediately shall be made to the department and to the county 1286  
board. 1287

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

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

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

(c) A superintendent, board member, or employee of a 1309  
county board of developmental disabilities; an administrator, 1310  
board member, or employee of a residential facility licensed 1311  
under section 5123.19 of the Revised Code; an administrator, 1312  
board member, or employee of any other public or private 1313  
provider of services to a person with mental retardation or a 1314  
developmental disability, or any MR/DD employee, as defined in 1315  
section 5123.50 of the Revised Code; 1316

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

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

(3) (a) The reporting requirements of this division do not 1331

apply to employees of the Ohio protection and advocacy system. 1332

(b) An attorney or physician is not required to make a 1333  
report pursuant to division (C)(1) of this section concerning 1334  
any communication the attorney or physician receives from a 1335  
client or patient in an attorney-client or physician-patient 1336  
relationship, if, in accordance with division (A) or (B) of 1337  
section 2317.02 of the Revised Code, the attorney or physician 1338  
could not testify with respect to that communication in a civil 1339  
or criminal proceeding, except that the client or patient is 1340  
deemed to have waived any testimonial privilege under division 1341  
(A) or (B) of section 2317.02 of the Revised Code with respect 1342  
to that communication and the attorney or physician shall make a 1343  
report pursuant to division (C)(1) of this section, if both of 1344  
the following apply: 1345

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

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

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

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

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

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

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

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

(F) Any person having reasonable cause to believe that a person with mental retardation or a developmental disability has suffered or faces a substantial risk of suffering abuse or neglect may report or cause a report to be made of that belief to the entity specified in this division. Except as provided in section 5120.173 of the Revised Code or as otherwise provided in this division, the person making the report shall make it to a law enforcement agency or the county board of developmental disabilities. If the person is a resident of a facility operated by the department of developmental disabilities, the report shall be made to a law enforcement agency or to the department.

If the report concerns any act or omission of an employee of a county board of developmental disabilities, the report immediately shall be made to the department and to the county board.

(G) (1) Upon the receipt of a report concerning the possible abuse or neglect of a person with mental retardation or a developmental disability, the law enforcement agency shall inform the county board of developmental disabilities or, if the person is a resident of a facility operated by the department of developmental disabilities, the department.

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

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

(4) When a county board of developmental disabilities receives a report under this section and believes that the degree of risk to the person is such that the report is an emergency, the superintendent of the board or an employee of the board the superintendent designates shall attempt a face-to-face contact with the person with mental retardation or a

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 review of the case. 1512  
1513

(B) For each review over which the board retains responsibility under division (A) of this section, it shall do all of the following: 1514  
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(1) Give both written and oral notice of the purpose of the review to the adult and, if any, to the adult's legal counsel or caretaker, in simple and clear language; 1517  
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1519

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

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

(4) Consult, if feasible, with the person who made the report under section ~~5101.61~~ 5101.63 or 5123.61 of the Revised Code and with any agencies or persons who have information about the alleged abuse or neglect; 1525  
1526  
1527  
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(5) Cooperate fully with the law enforcement agency responsible for investigating the report and for filing any resulting criminal charges and, on request, turn over evidence to the agency; 1529  
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1531  
1532

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