## I\_135\_1195-10

## 135th General Assembly Regular Session 2023-2024

Sub. H. B. No. 236

## A BILL

To enact sections 3792.05 and 3792.06 of the

Revised Code to prohibit a congregate care

setting from denying a patient or resident

access to an advocate and to name this act the

Never Alone Act.

1

Never Alone Act.

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

Section 1. That sections 3792.05 and 3792.06 of the	6
Revised Code be enacted to read as follows:	7
Sec. 3792.05. (A) As used in this section and section	8
3792.06 of the Revised Code:	9
(1) "Advocate" means an individual who advocates on behalf	10
of a congregate care setting patient or resident. An advocate	11
may include but is not limited to any of the following:	12
(a) The patient's or resident's spouse, family member,	13
<pre>companion, or guardian;</pre>	14
(b) In the case of a minor patient or resident, the	15
minor's residential parent and legal custodian or the minor's	1 6



guardian;	17
(c) An individual designated as an attorney in fact for	18
the patient or resident under a durable power of attorney for	19
health care as described in section 1337.12 of the Revised Code;	20
(d) An individual appointed by a court to act as the	21
patient's or resident's guardian.	22
(2) "Congregate care setting" includes all of the	23
<pre>following:</pre>	24
(a) A county home or district home operated under Chapter	25
5155. of the Revised Code;	26
(b) A health care facility, as defined in section 3702.30	27
of the Revised Code;	28
(c) A hospice care program or pediatric respite care	29
program, each as defined in section 3712.01 of the Revised Code,	30
but only when providing care and services other than in a home;	31
(d) A hospital, as defined in section 3722.01 of the	32
Revised Code;	33
(e) A hospital, as defined in section 5119.01 of the	34
Revised Code;	35
(f) A nursing home, residential care facility, or home for	36
the aging, each as defined in section 3721.01 of the Revised	37
Code;	38
(g) A residential facility, as defined in section 5123.19	39
of the Revised Code;	40
(h) A veterans' home operated under Chapter 5907. of the	41
Revised Code.	42
(3) "Physician" means an individual authorized under_	43

Chapter 4731. of the Revised Code to practice medicine and	44
surgery, osteopathic medicine and surgery, or podiatric medicine	45
and surgery.	46
(4) "Political subdivision" means a county, township,	47
municipal corporation, school district, or other body corporate	48
and politic responsible for governmental activities in a	49
geographic area smaller than that of the state. "Political	50
subdivision" also includes a board of health of a city or	51
general health district.	52
(5) "Practitioner" includes all of the following:	53
(a) A certified nurse-midwife, clinical nurse specialist,	54
or certified nurse practitioner, each as defined in section	55
4723.01 of the Revised Code;	56
(b) A physician;	57
(c) A physician assistant licensed under Chapter 4730. of	58
the Revised Code;	59
(d) A psychologist, as defined in section 4732.01 of the	60
Revised Code.	61
(6) "Public official" means any officer, employee, or duly	62
authorized representative or agent of a political subdivision or	63
state agency.	64
(7) "State agency" means every organized body, office,	65
agency, institution, or other entity established by the laws of	66
the state for the exercise of any function of state government.	67
"State agency" does not include a court.	68
(B)(1) At the time of a patient's or resident's admission	69
to a congregate care setting or at first opportunity after	70
admission, the congregate care setting shall do both of the	71

following:	72
(a) Inform the patient or resident that the patient or	73
resident may designate an individual to serve as the patient's	74
or resident's advocate;	75
(b) Except as provided in division (B)(2) of this section,	76
provide the patient or resident the opportunity to make such a	77
designation.	78
(2) In the case of an individual described in division (A)	79
(1) (b), (c), or (d) of this section, the congregate care setting	80
shall consider the individual to be a patient's or resident's	81
advocate without the patient or resident having to make such a	82
designation.	83
(3) An individual described in division (A)(1) of this	84
section is ineligible to act as a patient's or resident's	85
advocate if either of the following is the case:	86
(a) There has been an adjudicated finding that the	87
individual abused the patient or resident.	88
(b) The congregate care setting has determined that the	89
individual poses a serious risk to the patient's or resident's	90
physical health.	91
(4) At any time, a patient or resident may revoke an	92
individual's designation as an advocate by communicating the	93
revocation to a congregate care setting staff member. After	94
revocation, a patient or resident may designate another	95
individual to serve as the patient's or resident's advocate.	96
(5) Division (B)(1) of this section does not require a	97
congregate care setting to employ, or contract with, an	98
individual to serve as an advocate for the care setting's	99

patients or residents.	100
(C) After an advocate has been designated, the advocate	101
shall not do either of the following:	102
(1) Physically interfere with, delay, or obstruct the	103
provision of any health care to which any of the following has	104
consented: the patient or resident; in the case of a minor	105
patient or resident, the minor's residential parent and legal	106
custodian or the minor's quardian; the patient's or resident's	107
attorney in fact under a durable power of attorney for health	108
care; or the patient's or resident's court-appointed guardian;	109
(2) Engage in conduct prohibited under Title XXIX of the	110
Revised Code, including as described in sections 2903.13,	111
2903.22, and 2917.22 of the Revised Code, against a staff member	112
or licensed health care practitioner who is employed by, or	113
under contract with, the congregate care setting.	114
(D) After an advocate has been designated, all of the	115
following apply to the congregate care setting:	116
(1) The congregate care setting shall request from the	117
patient or resident consent to the disclosure of the patient's	118
or resident's medical information to the advocate, except that,	119
when applicable, the care setting instead shall request such	120
consent from one of the following individuals: the patient's or	121
resident's attorney in fact under a durable power of attorney;	122
the patient's or resident's court-appointed guardian; or, in the	123
case of a minor patient or resident, the minor's residential	124
parent and legal custodian or the minor's guardian.	125
Both the request and disclosure shall be made in	126
accordance with the care setting's policies and state and	127
federal law. If consent to the disclosure is refused, the care	128

setting shall not disclose the patient's or resident's medical	129
information to the advocate.	130
(2)(a) Except as provided in division (D)(2)(c) of this	131
section, at all times, the congregate care setting shall neither	132
deny the patient or resident access to the advocate nor prohibit	133
the patient's or resident's advocate from being physically	134
present with the patient or resident in the care setting.	135
(b) Division (D)(2)(a) of this section also applies during	136
either of the following:	137
(i) A public health emergency;	138
(ii) The period in which an order or rule issued under	139
division (C) of section 3701.13 of the Revised Code or section	140
3701.14, 3709.20, or 3709.21 of the Revised Code remains in	141
effect.	142
(c) Division (D)(2)(a) of this section does not apply if	143
any of the following is the case:	144
(i) The patient or resident requests that the advocate not	145
be present.	146
(ii) The advocate has violated either or both of the	147
prohibitions described in division (C) of this section.	148
(iii) The patient or resident is participating in a group	149
therapy session.	150
(in) The the grown of identificing perills above as	1 5 1
(iv) For the purpose of identifying possible abuse or	151
neglect of a patient or resident, the care setting separates, in	152
a manner consistent with standard operating procedures, the	153
advocate from the patient or resident. The separation shall be	154
temporary and last no longer than is necessary to identify abuse	155
or neglect.	156

(d) For purposes of division (D)(2)(a) of this section,	157
patient or resident access to an advocate includes access on-	158
site at the care setting itself and off-site through a means of	159
telecommunication provided to the patient or resident. Off-site	160
access through a means of telecommunication shall be provided at	161
no cost to the patient or resident.	162
(3) If the advocate violates either or both of the	163
prohibitions described in division (C) of this section, the	164
advocate shall be ineligible to serve as the patient's or	165
resident's advocate, the individual's designation as an advocate	166
shall become void, and the congregate care setting shall no	167
longer consider that individual to be the patient's or	168
resident's advocate. As soon as practicable, the care setting	169
shall provide the patient or resident with an opportunity to	170
designate another individual to serve as the patient's or	171
resident's advocate.	172
(E)(1) With respect to a congregate care setting that is a	173
hospital or health care facility, division (D)(2)(a) of this	174
section does not change or countermand any hospital or facility	175
policy relating to the isolation of a patient during an invasive	176
procedure, in particular, a policy under which the health care	177
practitioner performing or overseeing such a procedure may	178
determine that a sterile environment is required during the	179
procedure in order to protect patient safety.	180
(2) When a patient or resident of a congregate care	181
setting has a highly infectious disease requiring special	182
isolation precautions, division (D)(2)(a) of this section does	183
not prevent the care setting from establishing, in order to	184
minimize the disease's spread, a reasonable protocol governing	185
the use of personal protective equipment in the care setting.	186

The protocol's requirements must not be more restrictive for	187
advocates than for care setting staff.	188
Under the protocol, an advocate is exempt from using	189
personal protective equipment while in the care setting if the	190
advocate presents to the care setting a practitioner's note	191
documenting that such use conflicts with, or is not required	192
because of, the advocate's own physical or mental health	193
condition.	194
(3) In the event an infectious disease outbreak is serious	195
enough to require the staff of a congregate care setting that is	196
a hospital or health care facility to quarantine, then a	197
patient's advocate shall be allowed to quarantine with the	198
patient at the hospital or facility. The length of quarantine	199
and quarantine requirements must not be more restrictive for	200
advocates than for hospital or facility staff.	201
(F)(1) A congregate care setting shall be immune from	202
administrative and civil liability if a patient's or resident's	203
advocate contracts, as a result of serving as the advocate, an	204
infectious disease other than a foodborne disease.	205
(2) Division (F)(1) of this section does not grant a	206
congregate care setting that is a hospital or health care	207
facility immunity from a claim of negligence or medical	208
malpractice for any care provided to the advocate should the	209
advocate seek treatment at the hospital or facility for the	210
infectious disease described in division (F)(1) of this section.	211
(G) A political subdivision, public official, or state	212
agency shall not issue any order or rule that would require a	213
congregate care setting to violate this section.	214
(H) Either of the following individuals has a private	21 -

right of action against a congregate care setting for violating	216
this section and may commence an action against the care setting	217
for money damages and injunctive relief:	218
(1) A patient or resident;	219
(2) A patient's or resident's advocate, but only if the	220
advocate is one of the following: the patient's or resident's	221
immediate family member, spouse, or guardian; in the case of a	222
minor patient or resident, the minor's residential parent and	223
legal custodian or the minor's guardian; or the patient's or	224
resident's attorney in fact under a durable power of attorney	225
for health care.	226
If the individual prevails, the court shall award the	227
individual court costs and reasonable attorney's fees.	228
(I) Nothing in this section shall be construed to change,	229
interfere with, or restrict any of the rights and duties	230
described in sections 1337.11 to 1337.17 of the Revised Code.	231
Sec. 3792.06. (A) (1) The department of health shall create	232
a "Never Alone" information sheet that describes all of the	233
duties, prohibitions, requirements, and rights established under	234
section 3792.05 of the Revised Code, including the following:	235
(a) That a congregate care setting is prohibited from	236
denying a patient or resident access to an advocate except as	237
provided in division (D)(2) or (E) of section 3792.05 of the	238
Revised Code;	239
(b) That a congregate care setting is prohibited from	240
prohibiting a patient's or resident's advocate from being	241
physically present with the patient or resident in the care	242
setting except as provided in division (D)(2) or (E) of section	243
3792.05 of the Revised Code;	244

(c) That the spouse, family member, companion, or guardian	245
of a patient or resident may serve as a patient or resident	246
advocate;	247
(d) That a congregate care setting must allow a patient's	248
advocate to quarantine with the patient at a congregate care	249
setting that is a hospital or health care facility under the	250
circumstances described in division (E)(3) of section 3792.05 of	251
the Revised Code;	252
(e) That an individual described in division (H) of	253
section 3792.05 of the Revised Code has a private right of	254
action against a congregate care setting for violating that	255
section.	256
(2) The department shall periodically review and update	257
the information sheet and shall make it available on the	258
internet web site maintained by the department.	259
(B) At the time a patient or resident is admitted to, or	260
begins to receive services from, a congregate care setting, a	261
representative of the care setting shall do both of the	262
<pre>following:</pre>	263
(1) Verbally inform the patient or resident about the	264
duties, prohibitions, requirements, and rights established in	265
section 3792.05 of the Revised Code;	266
(2) Provide to the patient or resident a paper copy of the	267
"Never Alone" information sheet created under division (A) of	268
this section.	269
The copy provided under division (B)(2) of this section	270
shall be the most recent version available on the internet web	271
site maintained by the department.	272

Section 2. This act shall be known as the Never Alone Act.

273