



Transmittal Letter 87

TO: Children Services Stakeholders

FROM: Kara B. Wente, Director

DATE: August 7, 2026

SUBJECT: Five-Year Rule Review Chapter 9 Residential Facility Rules

Background

The Department of Children and Youth (DCY) is changing Ohio Administrative Code (OAC) substitute care rules in Chapter 9 as part of the five-year rule review process. These revisions include renumbering, reformatting, and adding clarity to enhance readability.

The DCY rules in the OAC were renumbered to 5180 on January 2, 2025, as a result of House Bill 33 (HB33) of the 135th General Assembly. For organizational reasons, as DCY opens rules, they are being rescinded and formatted into question and answer.

These rules will be effective on August 13, 2026.

Purpose

This letter identifies which rules are being rescinded and renumbered, along with any changes that have been discussed and identified by DCY staff and stakeholders. Each rule was restructured into a question-and-answer format and condensed for clarity and ease of understanding. Substantial revisions are noted directly under the affected rules; if no such note appears, only minor clarifications or formatting changes were made.

5180:2-9-05 “Requirements for residential parenting facility and crisis care facility furniture, materials and equipment; diaper changing”

This rule provides guidance to residential facilities regarding comprehensive safety expectations for equipment, materials, and furnishings. The language was updated to replace reference to “mother” with “parent.” No substantive changes were made to health, sanitation, or diapering safety requirements.



5180:2-9-06 “General safety”

This rule establishes general environmental and physical safety requirements for residential facilities. The language was added to prohibit individuals from carrying firearms, chemical weapons, or similar devices while transporting a child. The requirements related to the safe storage of hazardous materials were incorporated and clarified within this rule.

5180:2-9-10 “Storage of hazardous materials”

This rule is being rescinded, and its requirements are incorporated into OAC 5180:2-9-06.

5180:2-9-11 “Admissions and admissions log”

This rule outlines admission criteria and required documentation for children placed in residential facilities. The revisions provide additional clarity regarding the admission of individuals over age eighteen who meet the Administrative Code definition of a “child.” The rule was also amended to specify that a facility’s admissions policy must include the age, sex, and identified needs of children served and to require that a photograph of each child be included in documentation completed at or before admission.

5180:2-9-12 “Service plans”

This rule governs the development and review of individualized service plans for children in residential care. The revisions require documentation of a child’s current medications and known behavioral triggers, clarify that unsupervised time must be approved by the legal custodian and documented, require reviews to assess whether continued placement remains appropriate, and require service and behavior plans to be accessible onsite.

5180:2-9-14 “Medications”

This rule establishes standards for medication management in residential facilities. The revisions clarify that routinely taken over the counter medications must be documented at admission with potential side effects as indicated by the drug manufacturers website and prescribing contact information. The change also establishes the requirement for medication regimen review at least every six months and clarify that medications must be stored in locked storage inaccessible to children.

5180:2-9-16 “Visiting and communications”

This rule governs children’s rights to visitation and communication. The revisions clarify and expand provisions related to contact with important individuals in a child’s life. Language was added to explicitly include the youth ombudsman and a child’s court appointed special



advocate (CASA) as individuals a child may contact. The rule also clarifies that children with disabilities must be supported in contacting the state protection and advocacy organization and that staff are responsible for providing necessary assistance or accommodations to facilitate those communications. Additional language requires that private visitation and communication spaces be separate from sleeping areas. Existing provisions related to sibling visitation and family contact were retained and clarified.

5180:2-9-17 “Child’s money”

This rule addresses the handling of money earned or received by a child while in care. Language was clarified regarding documentation, reporting frequency, and timelines for returning a child’s funds at discharge. No substantive policy changes were made.

5180:2-9-19 “Personal belongings, hygiene, socialization, and education”

This rule provides guidance to residential facilities regarding a child’s personal belongings, daily living skills, participation in education and extracurricular activities, and the practice of their chosen religion. The rule title was updated to **“Personal belongings, hygiene, socialization, religious practice and education.”** New provisions establish standards for searching a child’s personal belongings based on reasonable suspicion, prohibit requiring youth to perform unpaid labor that substitutes for staff duties, require compensation when youth voluntarily perform staff-type tasks, and prohibit staff from taking youth to private residences. Existing language regarding religious freedom and application of the reasonable and prudent parent standard was retained and clarified.

5180:2-9-20 “Food and nutrition”

This rule sets standards for meals and nutrition in residential facilities. The revisions update the reference to the most current USDA Dietary Guidelines for Americans, add requirements addressing breast milk handling and storage, and clarify that parenting youth may breastfeed but cannot be required to do so.

5180:2-9-22 “Isolation, seclusion, and restraint”

This rule governs the use of isolation and physical restraint in residential facilities. The revisions add an explicit prohibition on prone restraint and clarify that restraint or isolation may only be used when a child poses an imminent risk of harm to self or others. The rule also clarifies that individuals using restraint or isolation must be currently trained in approved methods. The documentation requirements were updated to include DCY 01386 as part of



required visual observation records in the isolation log. The core safety standards, time limits, and oversight requirements remain consistent with prior rule language.

OAC 5180:2-9-23 “Notification and documentation of critical incidents”

This rule establishes requirements for reporting serious incidents involving children in care. The revisions strengthen notification timelines by creating a one-hour notification requirement for certain high-risk incidents, including the death of a child; allegations of abuse or neglect involving a staff member; situations where a child’s whereabouts are unknown and the child is believed to be at risk of harm or poses an imminent risk of harm to self or others; and unusual incidents involving emergent medical or mental health transportation. The rule also clarifies twenty-four-hour notification requirements when a child’s whereabouts are unknown beyond expected timeframes but the child is not believed to be in imminent danger. The documentation requirements were updated to include completion of Critical Incident Reports within Ohio’s Comprehensive Child Welfare Information System (CCWIS). Human trafficking was also added to the list of reportable incidents when known or suspected.

5180:2-9-24 “Child and family complaint policy and procedure”

This rule establishes requirements for residential facility complaint procedures. The language was clarified regarding complaint resolution timelines, non-retaliation protections, and documentation requirements. No substantive policy changes were made.

5180: 2-9-28 “Bedrooms”

This rule sets standards for bedroom space, occupancy, and sleeping arrangements in residential facilities. The revisions clarify compliance dates and variance allowances related to pass-through bedroom requirements. The rule also updates and expands crib safety standards to align with current federal requirements, including manufacture date expectations, certificate of compliance documentation, mattress fit specifications, and continued monitoring of Consumer Product Safety Commission recall information.

5180:2-9-29 “Bathrooms”

This rule establishes bathroom access, safety, and privacy standards for children in residential facilities. The revisions update the required bathroom ratio from one bathroom for every six children to one bathroom for every eight children of the same sex.



5180:2-9-30 “Kitchen and kitchen supplies”

This rule establishes food service licensure and kitchen equipment requirements for residential facilities operated by private agencies. The language was reorganized and clarified regarding licensure expectations and minimum equipment standards for kitchens and food service areas. No substantive policy changes were made.

5180:2-9-32 “Transportation”

This rule establishes safety requirements for transporting children in residential care. The revisions clarify supervision expectations during transport based on the number, ages, and needs of children and add explicit references to seat belt and child restraint requirements under sections 4511.81 and 4513.263 of the Revised Code. The existing requirements regarding vehicle safety, inspection, insurance, and emergency preparedness were retained and clarified.

Rules/Forms

The chart indicates the impacted OAC rules, transmittal letters, and/or required forms.

OAC Rules	Previous Transmittal Letter	DCY Forms
5180:2-9-05 R → OAC 5180:2-9-05 N	FCASMTL 427	N/A
5180:2-9-06 R → OAC 5180:2-9-06 N	FCASMTL 427	N/A
5180:2-9-10 R	FCASMTL 427	N/A
5180:2-9-11 R → OAC 5180:2-9-11 N	FCASMTL 515	N/A
5180:2-9-12 R → OAC 5180:2-9-12 N	FCASMTL 427	N/A
5180:2-9-14 R → OAC 5180:2-9-14 N	FCASMTL 427	N/A
5180:2-9-16 R → OAC 5180:2-9-16 N	FCASMTL 427	N/A
5180:2-9-17 R → OAC 5180:2-9-17 N	FCASMTL 427	N/A
5180:2-9-19 R → OAC 5180:2-9-19 N	FCASMTL 427	N/A
5180:2-9-20 R → OAC 5180:2-9-20 N	FCASMTL 427	N/A
5180:2-9-22 R → OAC 5180:2-9-22 N	FCASMTL 427	N/A
5180:2-9-23 R → OAC 5180:2-9-23 N	FCASMTL 427	N/A
5180:2-9-24 R → OAC 5180:2-9-24 N	FCASMTL 427	N/A



5180:2-9-28 R → OAC 5180:2-9-28 N	FCASMTL 427	N/A
5180:2-9-29 R → OAC 5180:2-9-29 N	FCASMTL 427	N/A
5180:2-9-30 R → OAC 5180:2-9-30 N	FCASMTL 427	N/A
5180:2-9-32 R → OAC 5180:2-9-32 N	FCASMTL 427	N/A

5180:2-9-05

Requirements for residential parenting facility and crisis care facility furniture, materials and equipment; diaper changing.

(A) What safety requirements apply to equipment, materials, and furniture in residential parenting and crisis care facilities?

All equipment, materials, and furniture in a residential parenting facility and crisis care facility are to be sturdy and safe, easy to clean and maintain, and free of sharp points or corners, splinters, protruding nails, loose or rusty parts or other hazardous features.

(B) What precautions should be taken with toys and small objects?

Toys or other materials small enough to be swallowed by an infant or toddler are to be kept out of their reach.

(C) How should cleaning equipment and chemicals be stored?

Cleaning equipment, cleaning agents, aerosol cans, or other chemical substances are to be stored in the original containers or clearly labeled, and not accessible to children. Items are to be locked in a cabinet, drawer or room when not in use.

(D) How should stationary outdoor recreational equipment be maintained?

Stationary outdoor recreational equipment including, but not limited to, climbing gyms, swings or slides are to be securely anchored.

(E) Are lawn mowers or hedge clippers allowed near children?

Lawn mowers, hedge clippers and other similar machinery are not to be used in an outdoor play area when a child is present in the play area.

(F) What safety measures apply to hard surfaces under climbing equipment?

A tile floor, concrete, asphalt, or other hard surface under any indoor or outdoor climbing apparatus are to be covered by a cushioned protective surface, such as, but not limited to, mats, mulch, sand or wood chips.

(G) How should wading pools be managed?

Wading pools are to be stored or are not to be accessible to children when not in use. When any child is in a wading or swimming pool, the child's parent and/or child care staff of the facility are to be present to supervise the child.

(H) What precautions apply to electrical outlets?

All electrical outlets within reach of an infant or toddler are to have protective coverings when not in use.

(I) How should toilets and sinks be adapted for children?

Toilets and sinks are to be of suitable height for use by a child or are to have a sturdy portable platform on which a child may stand.

(J) What are the guidelines for potty chairs?

Potty chairs are not to be located in areas used for food preparation or serving. Potty chairs are to be emptied, washed, rinsed and disinfected after each use.

(K) How often should toilets be disinfected?

Toilets are to be disinfected at least once daily or more often as needed using an appropriate germicidal agent.

(L) How should washable furniture and toys be cleaned?

Washable equipment and furniture are to be cleaned with soap and water at least once per month. Any item soiled during daily use with, but not limited to, blood, vomit, feces, urine and spills are immediately to be cleaned with soap and water and disinfected with an appropriate germicidal agent. Toys and other items placed in a child's mouth are to be cleaned thoroughly and disinfected with an appropriate germicidal solution and rinsed with water at least daily and immediately if soiled with blood, feces, urine or vomit.

(M) What are the requirements for diaper changing areas?

Changing diapers for all non-toilet trained children in a residential parenting facility or crisis care facility are to be handled in conformity with the following methods:

- (1) Diaper changes for all non-toilet trained children is to occur in a space that has a hand washing facility.
- (2) Hands of the person caring for the child are to be washed with soap and water before and after each diaper change.
- (3) When a central diaper changing station is used, there is to be a disposable separation material, that acts as a barrier placed between the child and the changing surface, which is discarded after each use.

- (4) Any product used during diapering, which is used on more than one child, is to be used so that the container does not touch the child. Any product obtained from a common container is to be removed and applied in such a manner so as not to contaminate the product or its container. Common containers are to be cleaned and sanitized after each use.
- (5) Storage and laundering of soiled diapers are to be handled in accordance with the following methods:

 - (a) Soiled diapers are to be disposed of in a plastic lined receptacle that prevents hand contamination. The receptacle is to be covered or otherwise enclosed and be inaccessible to children. These containers are to be emptied, cleaned and sanitized at least daily, or more frequently as needed to eliminate odor.
 - (b) Soiled diapers to be laundered are to be stored in an appropriate germicidal solution, out of the reach of children, until laundered. Diapers to be laundered are to be held for laundering for no longer than one day.

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5180:2-9-06

General Safety.

(A) Can a residential facility maintain explosives, firearms, or similar dangerous items on its grounds?

No residential facility shall maintain any explosives, pyrotechnics, firearms, chemical weapons, or other similar device or substance anywhere on the grounds of the facility.

(B) May staff, children, or security personnel carry weapons while on duty or on the grounds of a residential facility?

No residential facility shall permit any staff person, child, or security personnel to bear any firearm, chemical weapon, or other weapon or similar device while such person is anywhere on the grounds of the facility or on duty or engaged in the transportation of a child. Nothing in this paragraph shall be construed as prohibiting law enforcement authorities from bearing arms when they are present at the residential facility in conjunction with their official responsibilities.

(C) What are the requirements regarding paint conditions in a residential facility?

A residential facility is to be free of peeling or chipping paint. If a potential lead hazard is identified, the Ohio department of children and youth (DCY) is to make a referral to the appropriate agency.

(D) What safety measures are required for elevated structures like porches or patios?

All porches and patios more than thirty-six inches above ground level, elevated walkways, and elevated play areas on the grounds of a residential facility shall be enclosed with barriers designed to prevent falls.

(E) How should workshop or outdoor power-driven equipment be maintained and used?

All workshop or outdoor power-driven equipment used by a residential facility shall be maintained and operated in accordance with manufacturer's instructions. Such equipment may be used by children as permitted by law but only when under the supervision of a staff person.

(F) Is smoking allowed in residential facilities?

Smoking shall not be permitted in the presence of a child. If a residential facility permits smoking, the facility shall allow smoking only in an outdoor designated area. In the designated smoking area there shall be a proper smoking waste receptacle for collection of waste. All employees who engage in smoking shall wash their

hands when they reenter the facility. There shall be no smoking in vehicles while transporting children of the facility.

(G) What are the requirements for stairways accessible to children?

All stairways accessible to children within or on the grounds of a residential facility which contain more than four steps shall be equipped with a railing. In addition, any facility which is a residential parenting facility or crisis care facility shall guard all stairways accessible to children with a safety gate.

(H) How should outdoor hazardous areas be managed?

Outdoor areas located on or directly adjacent to a residential facility which are potentially hazardous to residents shall be safeguarded considering the age and functioning level of the residents.

(I) What documentation is required for swimming pools at residential facilities?

Each residential facility must maintain documentation verifying that all swimming pools maintained by the facility comply with the requirements of any local or state codes.

(J) How should pets or domesticated animals be managed?

Pets and other domesticated animals on residential facility premises shall be kept in a safe and sanitary manner in accordance with state and local laws. Pet vaccinations must be kept up to date at all times.

(K) How are children and teenage mothers protected from potentially dangerous animals?

All children or teenage mothers residing at a residential facility shall be protected from animals in or on the premises of the facility which are potentially dangerous to their health and safety.

(L) What are the requirements for door locks in rooms or storage areas?

(1) Any room or storage area within a residential facility where a child could be confined must have at least one door equipped with a lock that can be opened from both sides and unlocked from the inside without a key.

(2) Doors located on the grounds of a residential facility that do not require a lock that can be unlocked from either side of the door are:

- (a) A separate entrance to a portion of the residential facility such as a cellar, basement or outside storage room that is not accessible from within the residential facility.
- (b) A separate building such as a garage, barn or storage shed on the grounds of a residential facility.
- (c) Keys to these type of doors shall be kept in a place accessible only to staff of the facility.

(M) What are the requirements for toilet and shower stall doors?

All doors on toilet stalls and bathtub or shower stalls used by children in a residential facility shall be of the type which permit the door to be unlatched from either side of the door unless the stall design allows emergency access by climbing over or crawling under the partitions.

(N) How must poisonous, toxic, or flammable substances be stored?

- (1) Residential facilities that store poisonous, toxic, or flammable substances for any purpose must keep these materials in locked storage areas separate and apart from food and handle them in accordance with the manufacturer's instruction.
- (2) Flammable substances are to be stored and vented in accordance with the manufacturer's instructions in addition to any instructions of the local or state fire inspector.
- (3) All hazardous material are to be properly labeled.
- (4) Laundry supplies, except bleach, may be stored in an unlocked storage space separate and apart from food.

(O) What are the requirements for outdoor recreational equipment?

Stationary or portable outdoor recreational equipment such as designated climbing structures, swings and slides shall be anchored or stable. All recreational equipment must be age-appropriate and suited to the child's functional abilities.

(P) What are the surface requirements around recreational equipment?

Outdoor recreational equipment designated for climbing, swinging and sliding must be installed over a protective, resilient surface that meets the following safety standards:

- (1) Fall zones shall have a protective resilient material on the ground under and around the equipment.
- (2) The material shall be, but not limited to, washed pea gravel, mulch, sand, wood chips, synthetic material such as rubber mats or tiles manufactured for this purpose. Synthetic surfaces shall follow manufacturer's guidelines for depth.
- (3) Equipment shall not be placed over grass, concrete, asphalt, blacktop, dirt, rocks, or any hard surface.
- (4) Any loose-fill particulate impact absorbing material under and around recreational equipment shall be checked at least monthly for packing, and shall be turned over or raked up to increase the resilience capability.

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5180:2-9-11**Admissions and admissions log.**

(A) What is to be included in a residential facility's admission policy?

- (1) A description of the type of child who will be accepted into the facility, including but not limited to age and sex and needs of the child.
- (2) The conditions under which a child would not be accepted.

(B) Can a residential facility admit a child who does not meet its admission policy or certified criteria?

- (1) A residential facility can not accept into care any child who does not meet the facility's policy or the facility's certified capacity and gender criteria.
- (2) Under specific circumstances a facility may admit a child who falls outside of its age limitation policy if, in conjunction with a court, it determines that:
 - (a) The facility can meet the child's immediate needs; and
 - (b) The placement will not negatively impact the current population of children served under the agency's policy.

(C) Are adults allowed to be admitted as residents into a residential facility?

A residential facility is not to admit adults as residents into the facility. A facility may admit a person aged eighteen or older if the person meets the definition of a child pursuant to rule 5180:2-1-01 of the Administrative Code and is in the care and custody of a public children services agency (PCSA).

(D) What happens if a current resident turns eighteen?

If a current resident of the facility reaches age eighteen and is expected to graduate from secondary school by his or her nineteenth birthday or remains in the care and custody of a PCSA and meets the definition of a child pursuant to rule 5180:2-1-01 of the Administrative Code, the facility may allow the resident to remain as a resident.

(E) Can children under six years of age be admitted?

A residential facility will not admit any child under the age of six years except:

- (1) If the child is at least four years of age and is part of a sibling group being admitted to the residential facility where at least one of the members of the sibling group is six years of age or older. Placement of such child under the age of six years is not to exceed fourteen days.

(2) If the child is the child of a teenage mother being admitted with the child's parent to a residential parenting facility.

(3) If the child is admitted into a children's crisis care facility in accordance with rule 5180:2-9-36 of the Administrative Code.

(4) If the child is admitted into a residential infant care center in accordance with rule 5180:2-9-43 of the Administrative Code.

(F) What agreement is to be in place for each child admitted?

A residential facility is to have a written individual child care agreement for each child, as required by rule 5180:3-13-90 of the Administrative Code, with the person or agency holding custody of the child. A written individual child care agreement will also be executed for each child of a teenage mother placed in a residential parenting facility with the person or agency holding custody of the child.

(G) How should the facility handle child care agreement documentation?

(1) If the custodial agency provided a child's individual child care agreement, the residential facility is to maintain a copy of the agreement in the child's file.

(2) A residential facility is to maintain documentation that the agency requested a copy of each child's individual child care agreement executed between the custodial agency and the residential facility, in the child's record.

(H) Can a residential facility exceed its certified capacity?

A residential facility is not to exceed its certified capacity.

(I) What information is to be included and available in a residential facility's onsite admissions log?

(1) The name of each child admitted.

(2) The date of admission.

(3) The child's date of birth.

(4) The date of discharge.

(5) Such information will also be recorded on the admissions log for a child of a teenage mother admitted to a residential parenting facility.

(J) What documentation is to be completed at or before admission?

- (1) A photograph along with a physical description of each child.
- (2) Any available medical information.
- (3) The name, phone number and address of the custodial agency or custodian placing the child.
- (4) The reason for placement.
- (5) The name of the person who transported the child to the residential facility and the name of the agency with which the person transporting the child is affiliated, if any.
- (6) The name of the placing agency contact person for the child, when applicable.

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5180:2-9-12**Service plans.**

(A) When is a service plan to be developed for a child or teenage mother admitted to a residential facility?

The service plan is to be developed in writing and approved within thirty days before or after a child's or teenage mother's admission to the residential facility.

(B) Who is to be invited to help create and carry out the service plan?

(1) The following are to be invited to a meeting for the purpose of the development and implementation of the service plan:

(a) The child, as appropriate to age and functioning level, including a child involved in OhioRISE.

(b) The child's family, if applicable.

(c) The individual or agency that placed the child.

(d) The guardian ad litem (GAL) and probation officer, if applicable.

(e) The court appointed special advocate (CASA), if applicable.

(f) Staff members of the residential facility who provide direct care or service to the youth.

(g) OhioRISE care coordinator, if applicable.

(2) If any party is unable to attend in person, their input may be obtained and documented in writing or through phone or virtual participation.

(C) Who is authorized to approve the service plan in writing?

(1) A licensed social worker.

(2) A licensed independent social worker.

(3) A licensed professional counselor.

(4) A licensed professional clinical counselor.

(5) A civil service employee engaging in social work or professional counseling for a residential facility operated by a public children services agency (PCSA) or a local public entity (LPE) as described in rule 5180:2-5-02 of the Administrative

Code. If a civil service employee is not a licensed social worker or licensed counselor, the employee is not to approve service plans for any other facility except a residential facility operated by the PCSA they are employed with.

(D) What is the service plan to include, at a minimum?

- (1) A description of child specific goals and objectives the placement is designed to achieve including the timeframe for meeting the placement goals and objectives.
- (2) A statement of the placement plans upon discharge.
- (3) A description of educational, counseling, recreational, vocational, religious and health care activities or services that will be provided to the child by the residential facility.
- (4) A review of medication the child is currently prescribed pursuant to rule 5180:2-9-14 of the Administrative Code.
- (5) A description of any specialized services that will be provided or arranged.
- (6) Frequency of progress reports to be provided to the individual or agency having custody which placed the child.
- (7) Specifications for visitation between the child or teenage mother and family or friends, pursuant to rule 5180:2-9-16 of the Administrative Code.
- (8) A behavior intervention plan that is to identify each behavioral management technique to be used with the child and the techniques that are not advised based upon the child's medical, psychological or developmental history. Behavioral management techniques selected are to be based, at a minimum, upon the following considerations:
 - (a) The age, size and developmental level of the child.
 - (b) Known behavioral triggers for the child.
 - (i) Effective positive behavioral interventions and de-escalation strategies.
 - (ii) Preferred coping mechanisms or supports that help the youth self-regulate.
 - (c) The nature, pattern, and number of complaints or adjudicated felonies against the child.

- (d) The previous placement history of the child (absences without leave, disciplinary problems).
- (e) An assessment completed by a certified or licensed health care professional that documents whether there are medical restrictions to the use of specific behavior management interventions or behavior management techniques.
- (f) An assessment completed by a certified or licensed practitioner of behavioral science that documents whether there are psychological or developmental restrictions to the use of specific behavior management interventions or behavior management techniques.
- (g) The behavior intervention plan including all considerations outlined in paragraph (D)(8) of this rule are to be documented in the service plan.

(9) Specifications for supervision of the child.

- (a) The service plan is to specify the type of supervision needed for the child, including any conditions under which the child may be permitted unsupervised time in the community.
- (b) The child's legal custodian is to approve any unsupervised community time. This approval is to be documented in the service plan.

(E) What are the requirements for conducting service plan reviews in a residential facility?

- (1) Service plan reviews are to be conducted no later than ninety days after the initial approval and every ninety days from the most recent review thereafter.
- (2) For each review, the facility is to invite all individuals involved in the development and implementation of the service plan.
 - (a) If the status or assignment of an individual has changed, the facility is to invite the current individual or representative in that role.
 - (b) A lack of prior response or participation does not remove the opportunity to extend an invitation for subsequent reviews.
- (3) In consultation with the individual or agency holding custody of the child, the team is to evaluate the entire plan and make any necessary amendments.
- (4) The service plan review is to include an assessment of the current adjustment of the child and a determination of whether the child should remain in the facility.

- (5) Reviews should be scheduled at reasonable times to ensure availability and participation of all invited parties.

(F) Where should information regarding service plans be documented?

- (1) Documentation of invitations and any input provided outside of the service plan review should be included in the child's record.
- (2) The reviews are to be documented in the child record.

(G) Who receives copies of the service plan and its reviews?

- (1) A residential facility is to provide a written copy of the service plan and service plan review to the individual or agency that placed the child.
- (2) The residential facility is to document that the service plan and service plan review was provided to the individual or agency that placed the child.

(H) Where is the service plan and behavior plan kept for staff access?

- (1) Each youth's service plan and behavior plan are to be accessible onsite at the residential facility and available for review by staff responsible for the youth's care.
- (2) Staff should review the plans regularly to ensure consistent, informed care and timely responses to the youth's needs and behaviors.

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5180:2-9-14

Medications.

(A) What is the proper procedure for managing a child's medication during admission to a residential facility?

Upon admission to a residential facility the staff of the facility is to document all medications the child is currently prescribed, as well as any over the counter medications the child takes on a regular basis, in accordance with rule 5180:2-42-66.2 of the Administrative Code.

(B) How often is a child's medication regimen to be reviewed and documented?

(1) The residential facility is to review a child's medication regimen at least every six months during service plan reviews.

(2) Any changes to the medication regimen authorized by the licensed health professional is to be documented by staff immediately upon implementation. Implementation refers to:

(a) At the point medication change is carried out with the child, when the first dose of a new or altered medication is administered; or

(b) When the first scheduled dose is withheld, authorized by the licensed health professional's order.

(C) What kind of approval is needed before starting, altering, or stopping medication?

In no event shall staff of a residential facility begin, alter, or suspend a child's or teenage mother's medication without the documented verbal or written approval of a licensed health professional authorized to prescribe medication.

(D) What is staff to do if a child misses a dose or multiple doses of medication?

If a child misses dosages of the medication for longer than a forty-eight hour period, staff of the residential facility will contact a licensed health professional authorized to prescribe medication or the pharmacist that filled the prescription and obtain verbal or written instruction on how to restart the medication.

(E) What information should staff responsible for administering medication have access to?

Each staff person who is responsible for administering medication to a child is to be provided with a written schedule of the child's medication. This schedule is to be maintained in each child's case record as outlined by rule 5180:2-5-10 of the

Administrative Code and is to include, but is not limited to, the following instructions and information:

(1) The name of the child.

(2) The name of each medication to be administered.

(3) The proper dosage of each medication to be administered.

(4) The timetable for administration of medication.

(5) Instructions regarding administration of medication.

(6) Information concerning possible side effects of each medication as indicated by the drug manufacturer's official website, a physician, pharmacist or a licensed health professional authorized to prescribe drugs.

(7) Contact information for the prescribing physician.

(F) Is it permissible to administer medication to a child that was prescribed for someone else?

A child is not to be given any prescription medication which has not been prescribed for the child.

(G) How does a residential facility track the administration of medication?

Each residential facility is to maintain a written cumulative record of all prescribed medication administered to a child during placement in the facility. The current record is to be located with the medication and is to reflect reasons for altered or missed dosages of prescribed medication.

(H) How are medication to be stored in a residential facility?

All medication in a residential facility is to be stored in a locked cabinet or storage area away from children except that an inhaler or other medication may be available to a person with a special health condition, who may need these for an emergency.

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5180:2-9-16

Visiting and communications.

(A) What is a residential facility to do regarding visitation and communication?

A residential facility is to develop procedures to ensure that arrangements for visitation and communication between the child and family, including siblings, or friends are consistent with the family case plan and that such arrangements are documented in the service plan.

(B) Can a child in a residential facility send and receive mail?

A residential facility is to allow a child to send and receive mail subject only to the residential facility's rules regarding contraband and directives from the child's legal custodian when such rules and directives do not conflict with federal postal regulations.

(C) Can staff open or read a child's mail?

A residential facility is not to open or read a child's mail unless specified in the child's family case plan and/or service plan and approved by the child's custodian.

(D) What happens if staff suspect contraband in the mail?

A residential facility may require the child to open mail in front of a staff person if contraband is suspected and empty the package or envelope.

(E) Can a child in a residential facility have phone access?

A residential facility is to, in accordance with the service plan, allow a child access to a telephone which will permit the child to make and receive calls with appropriate privacy.

(F) How quickly can a child contact essential individuals after a request?

(1) Within twenty-four hours of requesting, a child is allowed to privately contact their:

(a) Attorney.

(b) Caseworker or custodial agency worker.

(c) Probation officer.

(d) Court-appointed special advocate (CASA).

(e) Guardian ad litem (GAL).

(f) Youth ombudsman office.

(2) If a child has a disability, the child is to have the opportunity to contact the state protection and advocacy organization, in accordance with section 5123.60 of the Revised Code. Staff are to ensure the child receives any necessary assistance or accommodation to facilitate this contact.

(G) Is a residential facility to provide private spaces for visits?

A residential facility must provide a private space that has a door and can be used for confidential conversations, phone calls, and visits. This area is to be separate from any area where children sleep or live.

(H) How is electronic communication to be handled?

A residential facility is to ensure that a child who has access to electronic media within or outside of the facility while under the supervision of agency staff, which may include internet, cell phones and e-mail service, adheres to the agency's policy regarding communications.

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5180:2-9-17**Child's money.**

(A) Who owns the money a child earns or receives while in a residential facility?

Any money provided to or earned by a child is considered to be the child's money and not funds belonging to the staff or the residential facility.

(B) How should the facility manage and protect a child's money?

A residential facility is to ensure that any child having the opportunity to receive or earn money has an account either at an established financial institution or in the residential facility for the safe keeping of such money.

(C) If the facility holds the child's money, what record keeping is required?

(1) A written record of the current balance, deposits, withdrawals, and any interest earned is to be provided upon request.

(2) At least every three months or at the time of discharge a written report of the current balance, deposits, withdrawals, and any interest earned is to be provided to the child.

(3) A copy of the written report is to be maintained in the child's record.

(D) Can the facility give the child something other than cash to use in-house?

A residential facility may issue credit script to children, in lieu of legal tender, for use within the facility.

(E) When is the facility return a child's money?

(1) At the time of a planned discharge.

(2) Within ten days if the discharge is not planned.

(F) Can the facility charge a child for things they are supposed to receive?

A residential facility is not to charge a resident for an item recommended to be provided to the resident as outlined in Chapter 5180:2-9 of the Administrative Code unless the resident is learning life skills as part of an independent living program pursuant to rules 5180:2-42-19 and 5180:2-42-19.1 of the Administrative Code.

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5180:2-9-19**Personal belongings, hygiene, socialization, religious practice and education.****(A) What is a residential facility to allow in terms of a child's personal belongings?**

A residential facility is to allow children in care to:

- (1) Acquire personal belongings.
- (2) Bring personal belongings with them.
- (3) Decorate bedrooms consistent with the limitations established by the residential facility that consider:
 - (a) The developmental stage of the child.
 - (b) The child's social, racial, cultural, religious, or ethnic background.

(B) Can the facility supervise or restrict items brought by children?

While children may have personal items, nothing in this rule is to be interpreted as preventing a residential facility from:

- (1) Supervising the use of a child's personal property.
- (2) Confiscating any items which:
 - (a) Pose a clear health or safety risk.
 - (b) Interfere with the rights or privileges of others.
 - (c) Are illegal to possess as a matter of state law or local ordinance.

(C) What if a child's belongings need to be searched?

An agency is to ensure the child is present during a search of the child's personal belongings, unless there is a clear imminent health or safety risk. Searches are to be conducted only when there is reasonable suspicion of contraband or other safety concerns that could pose a risk to the child, other residents and staff in the facility.

(D) What kind of clothing and footwear is to be provided by the residential facility?

- (1) A residential facility is to provide each child, in cooperation with the individual or agency holding custody of the child, with clothing and footwear which is clean, well-fitting, and seasonal.

(2) Clothing provided by a residential facility is to be appropriate to the child's age and is to consider personal preferences.

(3) Clothing provided to a child is to be considered to be a child's personal property.

(E) Is the residential facility to provide hygiene products?

A residential facility is to provide each child with adequate personal toiletry supplies. These supplies are to be appropriate to the child's age, developmental needs, and personal preferences, and are to be considered to be the child's personal property.

(F) Is the residential facility to provide hygiene instruction?

A residential facility is to provide instruction on good habits of personal care, hygiene, and grooming. This instruction must be tailored to each child's age, developmental level, and individual needs, with consideration for personal preferences and background.

(G) What type of chores or work tasks can the residential facility assign a child?

(1) A residential facility may assign a child daily tasks and work assignments on the grounds of or within the facility. Such assignments are to be of the type normally performed by a child and are to not be beyond the child's developmental ability to perform.

(2) Daily tasks and work assignments made pursuant to paragraph (G)(1) of this rule are not to place the child in physical danger and are not to interfere with the child's studies, normal social development, or child care responsibilities of a teenage mother.

(3) A residential facility is not to permit a child to be taken to the private residence of any staff member for the purpose of work, respite, or any form of "time away." All interactions between staff and children will occur within the bounds of the facility or in approved community settings consistent with the child's service plan and supervision requirements.

(4) A residential facility is not to assign a child to perform tasks that are ordinarily compensated for when performed by staff. Under no circumstances will youth be required or expected to perform duties that substitute for paid staff responsibilities. If a child voluntarily performs such a task, the facility is to ensure the child receives appropriate monetary compensation.

(H) How is education handled for children in care?

A residential facility is to make arrangements with the person or agency placing a child for each school-age child to attend a school that complies with the minimum standards as prescribed by the department of education and workforce (DOEW) and is to ensure that the child attends school in accordance with the child care agreement.

(I) Is a child permitted to attend extracurricular and cultural activities?

In accordance with the child's service plan, a residential facility is to encourage a child to participate in community, school, recreational, and cultural heritage activities which are appropriate to the child's age and functioning level and is to, as is necessary and reasonable, arrange appropriate transportation for the child to and from such activities.

(J) How are decisions made about a child's participation in extracurricular and social activities?

In accordance with sections 5103.162 and 2151.315 of the Revised Code, child care staff are to use the reasonable and prudent parent standard when considering whether to authorize a child who resides in the residential facility to participate in extracurricular, enrichment, and social activities. Decisions should prioritize:

(1) The child's safety.

(2) The child's developmental needs.

(3) The child's right to normalcy (such as participating in sleepovers, sports, clubs, etc) in ways that align with the child's peers.

(K) What are the obligations of a residential care facility in relation to religious practices of a child?

(1) A residential facility is to permit a child to practice the chosen religious faith of the child or his or her parent(s), guardian or legal custodian and is not to subject a child to any form of religious coercion.

(2) A child is not to be baptized or submitted to any religious procedures without prior consent of the child, according to their age and functioning level, and prior approval of the child's parent, guardian or custodian.

(L) Are life skills to be taught in the facility?

A residential facility is to, as appropriate, teach a child tasks and skills essential for life in the community.

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5180:2-9-20**Food and nutrition.**

(A) How many meals does a residential facility provide each day?

A residential facility is to make available or make provision for each child to have available three nutritious meals per day scheduled at regular intervals. If more than four hours elapse between any two meals or if fourteen hours elapse between the evening meal and breakfast, a nutritious snack is to be served.

(B) What is the standard to follow regarding food served to a child in a residential facility?

The resident's daily allowance of food is to meet the most recent dietary guidelines for Americans published by the food and nutrition information center of the United States department of agriculture (USDA). The most current guidelines can be accessed at <https://www.dietaryguidelines.gov>.

(C) Is there a standard for meat?

All meats served by the facility subject to inspection are to be inspected and graded by the federal or state department of agriculture.

(D) Is milk required in the daily diet?

A minimum of three daily servings of pasteurized milk, vitamin D fortified, are to be provided or made available in recommended amounts according to each child's age and sex.

(E) If a facility operates a farm or dairy, what rules apply?

A residential facility is to document that all agricultural, livestock, or dairy operations maintained by the facility conform to all applicable regulations adopted by the department of agriculture and the department of health.

(F) What are the requirements for menus in a residential facility?

Each children's residential center (CRC) is to prepare menus at least one week in advance. Cycle menus, if used, are to be at least three weeks long.

(G) How does a residential facility respond to a child's medical or religious dietary needs?

A residential facility is to accommodate and not to interfere with documented medical dietary needs or restrictions or religious dietary restrictions of an individual child.

(H) Are meals for staff different from meals for children in the residential facility?

Meals provided by a residential facility for direct child care staff are to be the same as those provided for the children unless staff has a documented dietary restriction.

(I) How is infant formula handled in a residential parenting or crisis care facility?

Formula for an infant prepared by or in a residential parenting facility or a children's crisis care facility is to be prepared in accordance with the instructions of the formula or by the techniques recommended by the attending physician which is to be on file at the facility.

(J) How is infant formula or breast milk preparation equipment cleaned in a residential facility?

Before preparing formula or breast milk for an infant, all equipment used in the preparation and storage of the formula or breast milk is to be thoroughly washed with hot water and detergent followed by a thorough rinsing in hot running water.

(K) How should infant formula or breast milk be labeled when stored in a residential facility?

Formula or breast milk for an infant to be stored at the facility for any period of time is to be labeled with the child's name and date of preparation

(L) How long can infant formula or breast milk be stored after preparation in a residential facility?

Formula or breast milk for an infant is to be refrigerated immediately after preparation and is not to be used more than twenty-four hours after preparation. The timeframe for use after preparation may be longer than twenty-four hours if directed by a physician or as documented in the instructions of the formula. The timeframe is not to be extended beyond the physician's recommendation or the instructions of the formula.

(M) Can breast milk or formula be heated in a microwave?

Formula nor breast milk for an infant is not to be heated in a microwave oven.

(N) Are parenting youth permitted to breastfeed?

Parenting youth are permitted to breastfeed, but the facility cannot require a youth to breastfeed.

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5180:2-9-22**Isolation, seclusion and restraint.**

(A) Under what circumstances can physical restraint and isolation be used in a residential facility?

Physical restraint and isolation are only to be used in emergency circumstances when less restrictive interventions have been determined to be ineffective and in accordance with written approval of a certified or licensed health care professional and a certified or licensed practitioner of behavioral science.

(B) What are the emergency situations that justify the use of physical restraint or isolation?

(1) For protection of the child from imminent harm.

(2) To protect another person from a child.

(3) For self protection.

(C) Who is authorized to use physical restraint or isolation?

Physical restraint and isolation are only to be utilized by staff who have current American red cross, American heart association or equivalent first aid and cardiopulmonary resuscitation (CPR) certification, and who are current on their training in the acceptable methods of restraint.

(D) Is approval needed to use restraint techniques?

(1) Any restraint techniques used to restrain a child are to be previously approved and listed in the behavioral intervention policy of the residential facility.

(2) Prone restraint is prohibited. Prone restraint is a method of intervention where a person's face and/or frontal part of his or her body is placed in a downward position touching any surface for any amount of time. Prone restraint includes physical or mechanical restraint.

(E) When should physical restraint or isolation end?

The physical restraint or isolation is to end when the child's behavior no longer constitutes an emergency.

(F) What are the requirements for a residential facility to use isolation rooms?

(1) A residential facility is to isolate residents only in accordance with the facility's written policy, which has received the prior approval of the Ohio department of children and youth (DCY).

(2) Isolation is only to be used by a residential facility with an isolation room approved by DCY that meets the requirements of this rule.

(G) How many children can be placed in an isolation room at one time?

Only one child is to be placed in an isolation room at a time.

(H) Are there time limits on how long a child can be isolated?

(1) A child is not to be isolated longer than fifteen continuous minutes without written supervisory approval.

(2) A child is not to be isolated for longer than one continuous hour and no longer than a total of two hours in any twenty-four hour period.

(I) What reasons can isolation be used?

A residential facility is to ensure that isolation is used exclusively for the behavior management of a child who is out of control at the time of isolation.

(J) What are the environmental requirements for an isolation room?

(1) Any room used for isolation is to be lighted, well-ventilated, and maintained at the same temperature as the rest of the facility. The room is to be at least fifty-six square feet in size, and is to have a ceiling height of at least seven feet, six inches and is to be free of any objects or materials which might be used to inflict self-injury.

(2) Any room used for isolation is not to be used for any other purpose, at any other time.

(K) How should staff communicate with a child during isolation?

When a child is placed in isolation, staff are to inform the child of the reason for placing him or her in isolation. Before continuing a child's isolation, staff are to discuss with the child the need for continued isolation. Upon release from isolation, staff are again to discuss with the child the reason for the use of isolation.

(L) What procedures must staff follow during isolation?

(1) Staff members are to ensure that a child who is placed in isolation is not in possession of any object or material which might be used to inflict self-injury.

(2) Staff is to be in auditory contact with an isolated child at all times and is to make visual observation of an isolated child every five minutes during the period of isolation.

(3) Visual observations as outlined by this rule are to be documented in an isolation log. The isolation log is to contain as outlined in DCY 01386 "Restraint and Isolation Incident Report":

(a) The name of the child.

(b) The time of placement in isolation.

(c) The reason for the placement in isolation and the discussion of the reason for isolation with the child.

(d) The chronology of observations including the signature or initials of the staff who placed the child in isolation.

(e) The written supervisory approval of a child isolated longer than fifteen continuous minutes.

(f) The written approval of the administrator or designee for continued isolation of a child for any period of isolation longer than thirty minutes.

(g) The time of removal from isolation.

(M) Is there an age limit for a child placed in isolation?

No child under the age of six is to be isolated.

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5180:2-9-23

Notification and documentation of critical incidents.

(A) When must a residential facility notify the placing individual or agency and the person or agency holding custody of a child?

(1) A residential facility shall notify the individual or agency which placed the child and the person or agency holding custody, if different, within one hour if any of the following occur while the child is placed in the facility:

(a) Death of the child or teenage mother.

(b) Alleged child abuse or neglect by a staff member.

(c) When a child's whereabouts are unknown and the child is believed to be at risk of harm or pose an imminent risk of harm to self or others.

(d) Any other unusual incident that poses an urgent action to reduce harm to the child such as a medical or mental health incident resulting in emergent transportation to a hospital or in-patient facility.

(2) A residential facility shall notify the individual or agency which placed the child and the person or agency holding custody, if different, within twenty-four hours if any of the following occur while the child is placed in the facility:

(a) An incident when a youth's whereabouts are unknown for longer than the period of time specified in the child's treatment plan that does not result in imminent risk of harm to self or others.

(b) Any serious injury or illness involving initial non-routine medical treatment.

(c) Expulsion or suspension from school.

(d) Any alleged delinquent or criminal activity of the child or teenage mother involving law enforcement.

(e) Any situation in which the child or teenage mother is a victim of alleged delinquent or criminal activity.

(f) Suicide ideation or self-mutilation attempts.

(g) Any incident of alleged abuse or neglect by a non-staff member.

(h) Any involvement with law enforcement resulting in a report.

- (i) Whenever a youth returns to the facility after any incident when their whereabouts were unknown pursuant to either paragraph (A)(1)(c) or (A)(2)(a) of this rule.
- (j) Any use of physical restraint or isolation pursuant to rule 5180:2-9-22 of the Administrative Code.
- (k) Any other unusual incident as defined in the agency's policies or by the agency.

(B) What documentation is required for these incidents?

- (1) A residential facility is to complete a critical incident report (CIR) for each occurrence of any of the items listed in paragraph (A) of this rule and is to document that the report was provided no later than the next business day after the occurrence to the individual or agency which placed the child and person or agency holding custody, if different.
- (2) The residential facility is to complete all CIRs in the Ohio's comprehensive child welfare information system (CCWIS).

(C) Who is required to report suspected child abuse or neglect in a residential facility?

- (1) Pursuant to section 2151.421 of the Revised Code, the following persons shall immediately report a situation listed in paragraph (C)(2) of this rule. This includes but is not limited to:
 - (a) Administrator.
 - (b) Employee.
 - (c) Clinical contractor.
 - (d) College intern.
 - (e) Volunteer.
- (2) An individual listed in paragraph (C)(1) of this rule shall make a report when they know or suspect any of the following:
 - (a) Physical abuse.
 - (b) Mental abuse.
 - (c) Sexual abuse.

(d) Exploitation.

(e) Neglect.

(f) Human trafficking.

(g) Threatened abuse or neglect.

(3) A report shall be made when the offense is committed by any person, including another resident of the facility.

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5180:2-9-24**Child and family complaint policy and procedure.**

(A) What is provided to the child and family regarding complaints when a child is admitted?

The residential facility is to have a complaint policy and procedure written in clear and simple language that is to be given and explained to the child and legally responsible adult including family, guardian or custodian at the time of the child's admission to the residential facility. Documentation that the child and family received the complaint policy and procedure is to be placed in the child's file.

(B) Can a child or family member file a complaint without going through the staff member involved?

The residential facility is to ensure that a child or family member is not required to transmit a complaint through the staff member who is the subject of the complaint.

(C) What protections are in place to prevent retaliation for making a complaint?

The residential facility is to ensure against retaliation by staff or by other children against the person making the complaint.

(D) How are complaints handled once submitted?

(1) A residential facility is to:

(a) Establish a procedure to make every effort to ensure that any complaint is resolved within thirty days of the filing of the complaint.

(b) Ensure unresolved complaints are reviewed by the administrator of the facility or designee within thirty days of the filing of the complaint.

(2) For any complaint not resolved within thirty days, a written explanation of the reason why the complaint has not been resolved within thirty days is to be placed in the child's record maintained pursuant to rule 5180:2-5-10 of the Administrative Code.

(3) A written report of each complaint and the resolution is to be compiled, and a copy placed in the child's record maintained pursuant to rule 5180:2-5-10 of the Administrative Code.

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5180:2-9-28**Bedrooms.**

(A) What are the space requirements for bedrooms in a children's residential center (CRC)?

All bedrooms contained within a CRC are to have seventy-four square feet for the initial occupant and an additional fifty square feet for each additional occupant, and a ceiling height of at least seven feet, six inches.

(1) If a residential facility certified prior to the effective date of this rule has an approved variance for the square footage requirement, the facility may still remain in operation as long as the agency has a copy of the approved variance on file for review by the department of children and youth (DCY).

(2) All facilities certified after the effective date of this rule are to adhere to the square footage requirements of this paragraph.

(B) How are bedrooms to be assigned in a CRC or group home?

Bedrooms in a CRC or group home are to be used to sleep children of the same sex.

(C) What is the maximum number of children allowed per bedroom?

No bedroom in a residential facility, constructed or put into use after January 1, 1991, can be used to sleep more than four children.

(D) Can non-ambulatory children sleep on upper floors?

A residential facility is not to permit non-ambulatory children to sleep above the entry level of a building, unless the facility is specifically approved for such children by the state fire marshal or a local certified fire safety inspector.

(E) What are the window requirements for bedrooms?

Each bedroom in a residential facility is to have at least one outside wall window. The window is to be equipped with a means for providing privacy. The window is also to be screened and capable of opening and closing, unless the room is provided with a ventilation system which provides a regular change of fresh air such as a central air conditioning system.

(F) Do live-in child care staff need separate sleeping spaces?

Residential facilities are to provide separate sleeping space for live-in child care staff.

(G) Can bedrooms be accessed through another bedroom or bathroom?

Bedrooms in a residential facility must not require a child to pass through another bedroom or bathroom, and no other person should need to pass through a child's bedroom to access another room.

(1) If a residential facility certified prior to December 1, 2010, has an approved variance for the pass through requirement, the facility may still remain in operation as long as the agency has a copy of the approved variance on file for review by DCY.

(2) All facilities certified after December 1, 2010, are to adhere to the pass through requirements of this paragraph.

(H) Are there other requirements for bedrooms?

All bedrooms in a residential facility are to have a standard door that is capable of opening and closing.

(I) What are the requirements for beds in a residential facility?

Each bedroom in a residential facility is to have one bed for each child assigned to the bedroom. Beds are not to be less than thirty inches wide and not less than five feet in length and appropriate to the child's size. Each bed is to have a clean and comfortable mattress. A child's bed should not be used by another child when the child is temporarily away from the facility.

(1) If a residential facility certified prior to December 1, 2010, has an approved variance for any requirement of this paragraph, the facility may still remain in operation as long as the agency has a copy of the approved variance on file for review by DCY.

(2) All facilities certified after December 1, 2010, are to adhere to the requirements of this paragraph.

(J) How often should bedding be changed and laundered?

(1) Sheets and pillowcases are to be changed and laundered at least weekly or more frequently if needed. Waterproof mattress coverings are to be provided to a child as needed.

(2) Each child in a residential facility is to be provided with clean sheets, pillowcases, a pillow, and blankets.

(K) What are the bunk bed safety requirements?

(1) Bunk beds in residential facilities should provide a safe and secure sleeping environment. To ensure safety, upper bunks need to have protective safety rails for children under ten or for those who may require extra support due to physical, mental, or emotional needs.

(2) Children under six years of age are to sleep on lower bunks.

(3) Bunk beds can be no higher than two tiers.

(4) Bunk beds can not be used in a residential parenting facility.

(L) Are children to be provided with storage space and an area for hanging clothes?

(1) Each child is to have storage for clothing and personal items in their bedroom and a space in their bedroom for hanging clothes.

(2) Each teenage mother in a residential parenting facility is to be provided with storage space and a space in their bedroom for hanging clothes for herself, and for her child's clothing, in her bedroom.

(M) What happens if required bedroom items are removed for safety?

If a residential facility removes any necessary items from a child's bedroom, the facility is to document the reason for the removal and is to have a statement showing the removal of the items was necessary for the safety and well-being of the child signed by one of the following:

(1) A licensed social worker.

(2) A licensed independent social worker.

(3) A licensed professional counselor.

(4) A licensed professional clinical counselor.

(5) A civil service employee engaging in social work or professional counseling for a residential facility operated by a public children services agency (PCSA) or a local public entity (LPE) as described in rule 5180:2-5-02 of the Administrative Code. If a civil service employee is not a licensed social worker or licensed counselor, the employee is not to sign statements for any other facility except a residential facility operated by the PCSA they are employed with.

(N) Can teenage mothers and their children share a bedroom with others?

- (1) In a residential parenting facility, no teenage mother and her child is to share a bedroom with another teenage mother and her child.
- (2) In a residential parenting facility, each teenage mother is to have a bed of her own and is not permitted to sleep with her child in the same bed.

(O) What are the crib safety requirements?

Each infant, toddler or preschool age child is to have an age appropriate bed. A bassinet is to be used only for infants under three months of age or less than fifteen pounds in weight. An infant or toddler under thirty-five inches in height is to be provided with a full sized crib which meets the following requirements:

- (1) Cribs with a documented manufacture date after June 28, 2011, have to meet the new federal standards to be sold. The date of manufacture shall be attached to the crib.
- (2) Any crib manufactured before June 28, 2011, shall have a certificate of compliance (COC) on file. The facility may have to contact the manufacturer of the crib to receive a COC if they do not request one from the retailer when they purchase the crib.
- (3) Each crib shall be of sturdy construction and have:
 - (a) Each crib is to have a firm mattress which is at least one and one-half inches thick and covered with a waterproof material. The mattress is to fit snugly enough in the frame so that there is no more than a one and one-half inch gap between the mattress and the sides of the crib.
 - (b) The facility is responsible for monitoring for recall and safety information as issued by the consumer product safety commission (CPSC).

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5180:2-9-29

Bathrooms.(A) What are the requirements for bathrooms in a residential facility?

- (1) A residential facility is to have a bathroom for every eight children of the same sex that can be placed in the facility.
- (2) A residential facility may have congregate bathrooms that have more than one sink, toilet, and shower.
- (3) Each bathroom must have:
 - (a) Each toilet capable of flushing.
 - (b) Each sink with both hot and cold running water.
 - (c) Each shower with both hot and cold running water.

(B) Can a private, single bathroom be used to meet the bathroom requirement for a residential facility?

If a residential facility has a private, single bathroom containing one sink, one flushing toilet, and one bath or shower, the bathroom may be used to meet the ratio requirement of one bathroom for every eight children, or fraction thereof.

(C) Are infants and toddlers counted in the bathroom ratio?

Children at a crisis care facility who are still using diapers and under the age of three are not to be counted in the bathroom ratio requirements of paragraphs (A) and (B) of this rule.

(D) What is the standard for bathroom access in a residential facility?

- (1) A children's residential center (CRC) is to have at least one bathroom with a toilet and sink on the floor with the sleeping rooms.
- (2) Bathrooms in a residential facility are to be situated so as to allow direct access to them without the necessity of passing through a bedroom, except when a bedroom has an attached bathroom used only for the children who reside in that bedroom.

(E) What hygiene items and equipment must be available in bathrooms?

Each bathroom in a residential facility is to have toilet paper, towels or air dryers, soap, and wastebaskets available for use.

(F) Do bathtubs and showers need safety features?

Bathtubs and showers in a residential facility are to have nonskid surfaces.

(G) What privacy requirements apply to showers and toilets?

Except for bathtubs exclusively used to bathe children age zero to three in a crisis care facility, all bathtubs and showers in a residential facility are to have enclosures or screens which afford individual privacy. When more than one toilet is located in the same bathroom, each toilet is to be partitioned and include a door capable of remaining closed.

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5180:2-9-30

Kitchens and kitchen supplies.

(A) Does a children's residential center need a food service license to prepare meals?

Each children's residential center owned or operated by a private child placing agency (PCPA) or private noncustodial agency (PNA) is to secure a food service license for each kitchen in which meals are prepared in accordance with the requirements of Chapter 3717. of the Revised Code and Chapter 3701-21 of the Administrative Code pertaining to food service operation as administered and enforced by the local department of health.

(B) What must be available in each kitchen within a residential facility?

(1) Permanent or disposable utensils.

(2) Appliances for storage and preparation of meals served in the facility.

(C) What items are to be provided at food serving areas in residential facilities?

Each food serving location within a residential facility is to provide the following permanent or disposable items in sufficient quantity to serve the population assigned to eat at that location:

(1) Serving dishes.

(2) Cups or glasses.

(3) Silverware.

(D) How should a kitchen be equipped if a residential living unit does not have a full kitchen?

In instances where a residential living unit does not include a full kitchen, the unit shall be furnished with appropriate equipment to allow for the preparation of light snacks.

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5180:2-9-32**Transportation.**(A) What transportation responsibilities does a residential facility have?

A residential facility is to ensure that all necessary vehicles used to transport children are made available for implementing each child's service plan.

(B) What are the requirements for vehicles owned, rented, or leased by a residential facility?

(1) Be annually inspected and approved by the Ohio state highway patrol and continually maintained in a safe operating condition.

(2) Have written maintenance records maintained by each facility on all vehicles which are used for transporting children.

(3) Contain first aid supplies in each vehicle, when the vehicle is used to transport children.

(4) Be maintained in a safe condition and in compliance with all motor vehicle laws.

(5) Be covered by liability insurance in accordance with current state laws.

(C) What are the requirements for privately owned, rented, or leased vehicles used by a residential facility?

(1) Be annually inspected and approved by the Ohio state highway patrol and continually maintained in a safe operating condition.

(2) The residential facility is to keep current documentation of automobile insurance for all privately owned vehicles used to transport children of the facility.

(3) Contain first aid supplies in each privately owned vehicle when the vehicle is used to transport children of the facility.

(4) Be maintained in a safe condition and in compliance with all motor vehicle laws and are to be covered by liability insurance in accordance with current state laws.

(D) What are the driver requirements for transporting children?

Each residential facility is to ensure that any employee is to have a valid driver's license when transporting children in either a privately owned vehicle or a vehicle owned by the facility.

(E) What supervision is needed for transporting children?

Each residential facility is to ensure that supervision appropriate to the number and ages of children being transported is available in any vehicle used by the facility to transport children.

(F) What are the seat belt and child restraint requirements?

In a vehicle, the driver and all passengers are to use the passenger safety belts and be properly restrained in accordance with sections 4511.81 and 4513.263 of the Revised Code while the vehicle is in motion.

(G) What are the child restraint requirements for transporting children in residential facilities?

(1) Children under four years old or under forty pounds must be restrained in a child restraint seat secured by a safety belt or the lower anchors and tethers for children (LATCH) system. The seat must not be placed in the front seat of a vehicle that has a back seat.

(2) Infants under one year old or under twenty pounds must be restrained in a rear-facing position and, whenever possible, not placed in the front seat of a vehicle equipped with passenger airbags.

(3) Children at least one year old and between twenty to forty pounds may be restrained in a rear-facing position.

(4) Children under eight years old and under four feet nine inches must be properly restrained in a booster seat, placed in the back seat of a vehicle.

(5) Children aged eight to fifteen years old must be restrained in either:

(a) A belt-positioning booster seat in a forward-facing position; or

(b) A seat belt that includes both a lap and shoulder belt, if available.

(6) Children age twelve and under, when riding in a vehicle with a back seat, should not ride in the front seat, whenever possible.

(7) Safety and recall information from the consumer product safety commission (CPSC) related to child safety seats or booster seats must be reviewed and implemented by the residential facility.

(H) What if there is a medical exception for child restraints?

Paragraph (G) of this rule does not apply if the facility has a signed affidavit by a licensed Ohio physician or an Ohio licensed chiropractor stating that the child has a physical disability that makes use of standard restraint systems impossible or impractical. In such cases, the child must be safely and appropriately restrained according to the medical recommendation noted in the affidavit.

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TO BE RESCINDED

5180:2-9-05 **Requirements for residential parenting facility and crisis care facility furniture, materials and equipment; diaper changing.**

- (A) All equipment, materials, and furniture in a residential parenting facility and crisis care facility shall be sturdy and safe, easy to clean and maintain, and free of sharp points or corners, splinters, protruding nails, loose or rusty parts or other hazardous features.
- (B) Toys or other materials small enough to be swallowed by an infant or toddler shall be kept out of their reach.
- (C) Cleaning equipment, cleaning agents, aerosol cans, or other chemical substances shall be stored in the original containers or clearly labeled, and not accessible to children. Items shall be locked in a cabinet, drawer or room when not in use.
- (D) Stationary outdoor recreational equipment including, but not limited to, climbing gyms, swings or slides shall be securely anchored.
- (E) Lawn mowers, hedge clippers and other similar machinery shall not be used in an outdoor play area when a child is present in the play area.
- (F) A tile floor, concrete, asphalt, or other hard surface under any indoor or outdoor climbing apparatus shall be covered by a cushioned protective surface, such as, but not limited to, mats, mulch, sand or wood chips.
- (G) Wading pools shall be stored or shall not be accessible to children when not in use. When any child is in a wading or swimming pool, the child's mother and/or child care staff of the facility shall be present to supervise the child.
- (H) All electrical outlets within reach of an infant or toddler shall have protective coverings when not in use.
- (I) Toilets and sinks shall be of suitable height for use by a child or shall have a sturdy portable platform on which a child may stand.
- (J) Potty chairs shall not be located in areas used for food preparation or serving. Potty chairs shall be emptied, washed, rinsed and disinfected after each use.
- (K) Toilets shall be disinfected at least once daily or more often as needed using an appropriate germicidal agent.

- (L) Washable equipment and furniture shall be cleaned with soap and water at least once per month. Any item soiled during daily use with, but not limited to, blood, vomit, feces, urine and spills shall immediately be cleaned with soap and water and disinfected with an appropriate germicidal agent. Toys and other items placed in a child's mouth shall be cleaned thoroughly and disinfected with an appropriate germicidal solution and rinsed with water at least daily and immediately if soiled with blood, feces, urine or vomit.
- (M) Changing diapers for all non-toilet trained children in a residential parenting facility or crisis care facility shall be handled in conformity with the following methods:
- (1) Changing of diapers for all non-toilet trained children shall occur in a space that has a hand washing facility.
 - (2) Hands of the person caring for the child shall be washed with soap and water before and after each diaper change.
 - (3) When a central diaper changing station is used, there shall be a disposable separation material, that acts as a barrier placed between the child and the changing surface, which is discarded after each use.
 - (4) Any product used during diapering, which is used on more than one child, shall be used so that the container does not touch the child. Any product obtained from a common container shall be removed and applied in such a manner so as not to contaminate the product or its container. Common containers shall be cleaned and sanitized after each use.
 - (5) Storage and laundering of soiled diapers shall be handled in accordance with the following methods:
 - (a) Soiled diapers shall be disposed of in a plastic lined-receptacle that prevents hand contamination. The receptacle shall be covered or otherwise enclosed and be inaccessible to children. These containers shall be emptied, cleaned and sanitized at least daily, or more frequently as needed to eliminate odor.
 - (b) Soiled diapers to be laundered shall be stored in an appropriate germicidal solution, out of the reach of children, until laundered. Diapers to be laundered shall be held for laundering for no longer than one day.

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5180:2-9-06

General safety.

- (A) No residential facility shall maintain any explosives, pyrotechnics, firearms, chemical weapons, or other similar device or substance anywhere on the grounds of the facility.
- (B) No residential facility shall permit any staff person, child, or security personnel to bear any firearm, chemical weapon, or other weapon or similar device while such person is anywhere on the grounds of the facility or on duty. Nothing in this paragraph shall be construed as prohibiting law enforcement authorities from bearing arms when they are present at the residential facility in conjunction with their official responsibilities.
- (C) A residential facility is to be free of peeling or chipping paint. If a potential lead hazard is identified, the Ohio department of job and family services (ODJFS) is to make a referral to the appropriate agency.
- (D) All porches and patios more than thirty-six inches above ground level, elevated walkways, and elevated play areas on the grounds of a residential facility shall be enclosed with barriers designed to prevent falls.
- (E) All workshop or outdoor power-driven equipment used by a residential facility shall be maintained and operated in accordance with manufacturer's instructions. Such equipment may be used by children as permitted by law but only when under the supervision of a staff person.
- (F) Smoking shall not be permitted in the presence of a child. If a residential facility permits smoking, the facility shall allow smoking only in an outdoor designated area. In the designated smoking area there shall be a proper smoking waste receptacle for collection of waste. All employees who engage in smoking shall wash their hands when they reenter the facility. There shall be no smoking in vehicles while transporting children of the facility.
- (G) All stairways accessible to children within or on the grounds of a residential facility which contain more than four steps shall be equipped with a railing. In addition, any facility which is a residential parenting facility or crisis care facility shall guard all stairways accessible to children with a safety gate.
- (H) Outdoor areas on the grounds of or immediately adjacent to a residential facility which are potentially hazardous to residents shall be safeguarded considering the age and functioning level of the residents.

- (I) Each residential facility shall document that all swimming pools maintained by the facility comply with the requirements of any local or state codes.
- (J) Pets or other domesticated animals in or on the premises of a residential facility shall be kept in a safe and sanitary manner in accordance with state and local laws. Pet vaccinations shall be maintained current at all times.
- (K) All children or teenage mothers residing at a residential facility shall be protected from animals in or on the premises of the facility which are potentially dangerous to their health and safety.
- (L) Door locks:
 - (1) All locks on at least one door to any room or storage area in which a child could be confined in a residential facility shall be of the type which permit the door to be unlocked from either side of the door and be unlocked from the inside of the room or storage area without a key.
 - (2) Doors on the grounds of a residential facility that do not need a lock that can be unlocked from either side of the door are:
 - (a) A separate entrance to a portion of the residential facility such as a cellar, basement or outside storage room that is not accessible from within the residential facility.
 - (b) A separate building such as a garage, barn or storage shed on the grounds of a residential facility.
 - (c) Keys to these type of doors shall be kept in a place accessible only to staff of the facility.
- (M) All doors on toilet stalls and bathtub or shower stalls used by children in a residential facility shall be of the type which permit the door to be unlatched from either side of the door unless the stall is of such construction as to permit emergency access by climbing over or crawling under the partitions.
- (N) Each residential facility which maintains any poisonous, toxic, or flammable materials and substances for any purpose on the grounds of the facility shall maintain all such substances in locked storage areas and according to the manufacturer's instructions.
- (O) Stationary or portable outdoor recreational equipment designated for climbing, and swings and slides shall be anchored or stable. All recreational equipment shall be appropriate to the age and functioning level of the residents.

- (P) Outdoor recreational equipment designated for climbing, and swings and slides shall be surrounded by a protective, resilient surface that meets the following requirements:
- (1) Fall zones shall have a protective resilient material on the ground under and around the equipment.
 - (2) The material shall be, but not limited to, washed pea gravel, mulch, sand, wood chips, synthetic material such as rubber mats or tiles manufactured for this purpose. Synthetic surfaces shall follow manufacturer's guidelines for depth.
 - (3) Equipment shall not be placed over grass, concrete, asphalt, blacktop, dirt, rocks, or any hard surface.
 - (4) Any loose-fill particulate impact absorbing material under and around recreational equipment shall be checked at least monthly for packing, and shall be turned over or raked up to increase the resilience capability.

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5180:2-9-10

Storage of hazardous materials.

- (A) Each residential facility shall maintain onsite only those poisonous, toxic, or flammable materials and substances that are used to maintain the residential facility.
- (B) Poisonous and toxic materials and substances shall be:
 - (1) Stored in accordance with the manufacturer's storage instructions in locked storage spaces separate and apart from food.
 - (2) Clearly labeled.
- (C) In cases where poisonous and toxic materials are transferred from their original containers to substitute containers, the substitute containers shall be clearly labeled as to their contents. Keys to storage spaces shall be available only to authorized staff.
- (D) Laundry supplies, except bleach, may be stored in an unlocked storage space separate and apart from food.
- (E) Flammable substances shall be stored and vented in accordance with the manufacturer's instructions in addition to any instructions of the local or state fire inspector.

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5180:2-9-11

Admissions and admissions log.

- (A) A residential facility shall develop a written admissions policy specifying the type of child who will be accepted into the facility and the conditions under which a child would not be accepted. A residential facility shall not accept into care any child who does not meet the facility's policy or the facility's certified capacity, age and gender criteria. No residential facility shall admit adults as residents into the facility.
- (B) A facility may admit a specific child who does not meet the agency's age limitation policy if the facility, in conjunction with a court, determines it will be able to meet the child's needs and the placement will not have a detrimental effect on the current population of children specified in the agency's policy.
- (C) If a current resident of the facility reaches age eighteen and is expected to graduate by his or her nineteenth birthday, the facility may allow the resident to remain as a resident until graduation.
- (D) A residential facility will not admit any child under the age of six years except:
 - (1) If the child is at least four years of age and is part of a sibling group being admitted to the residential facility where at least one of the members of the sibling group is six years of age or older. Placement of such child under the age of six years shall not exceed fourteen days.
 - (2) If the child is the child of a teenage mother being admitted with the child's parent to a residential parenting facility.
 - (3) If the child is admitted into a children's crisis care facility in accordance with rule 5101:2-9-36 of the Administrative Code.
 - (4) If the child is admitted into a residential infant care center in accordance with rule 5101:2-9-43 of the Administrative Code.
- (E) A residential facility shall have a written individual child care agreement for each child, as required by rule 5101:2-42-90 of the Administrative Code, with the person or agency holding custody of the child. A written individual child care agreement shall also be executed for each child of a teenage mother placed in a residential parenting facility with the person or agency holding custody of the child.
- (F) A residential facility shall, in the child's record, maintain documentation that the agency requested a copy of each child's individual child care agreement executed between the custodial agency and the residential facility. If the custodial agency provided a

child's individual child care agreement, the residential facility shall maintain a copy of the agreement in the child's file.

- (G) No residential facility shall exceed its certified capacity.
- (H) Each residential facility shall maintain a separate admissions log which shall include the name of each child admitted, the date of admission, the child's date of birth, and the date of discharge. Such information shall also be recorded on the admissions log for a child of a teenage mother admitted to a residential parenting facility.
- (I) A residential facility shall document prior to or at the time of admission, a physical description of each child, any available medical information, the name, phone number and address of the custodial agency or custodian placing the child, the reason for placement, the name of the person who transported the child to the residential facility and the name of the agency with which the person transporting the child is affiliated, if any. The facility's record for the child shall also indicate, when applicable, the name of the placing agency contact person for the child.

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5180:2-9-12 **Service plans.**

- (A) The service plan shall be developed in writing and approved within thirty days before or after a child's or teenage mother's admission to the residential facility.
- (1) The following shall be invited to be involved in the development and implementation of the service plan:
- (a) The child as appropriate to age and functioning level.
 - (b) The individual or agency that placed the child.
 - (c) The guardian ad litem and probation officer if applicable.
 - (d) Staff members who provide direct care, counseling, group work, recreation, education and health services and other service providers if applicable.
- (2) The service plan shall receive written approval by at least one of the following:
- (a) A licensed social worker.
 - (b) A licensed independent social worker.
 - (c) A licensed professional counselor.
 - (d) A licensed professional clinical counselor.
 - (e) A civil service employee engaging in social work or professional counseling for a residential facility operated by a public children services agency (PCSA) or a local public entity (LPE) as described in rule 5101:2-5-02 of the Administrative Code. If a civil service employee is not a licensed social worker or licensed counselor, the employee shall not approve service plans for any other facility except a residential facility operated by the PCSA they are employed with.
- (B) The service plan shall, at a minimum, contain:
- (1) A statement of goals and objectives the placement is designed to achieve including the timeframe for meeting the placement goals and objectives.
 - (2) A statement of the placement plans upon discharge.

- (3) A description of educational, counseling, recreational, vocational, religious and health care activities or services that will be provided to the child by the residential facility.
- (4) A description of any specialized services that will be provided or arranged.
- (5) Frequency of progress reports to be provided to the individual or agency having custody which placed the child.
- (6) Specifications for visitation between the child or teenage mother and family or friends, pursuant to rule 5101:2-9-16 of the Administrative Code.
- (7) A behavior intervention plan that shall identify each behavioral management technique to be used with the child and the techniques that are contraindicated based upon the child's medical, psychological or developmental history. Behavioral management techniques selected shall be based, at a minimum, upon the following considerations:
 - (a) The age, size and developmental level of the child.
 - (b) The nature, pattern, and number of complaints or adjudicated felonies against the child.
 - (c) The previous placement history of the child (absences without leave, disciplinary problems).
 - (d) An assessment completed by a certified or licensed health care professional that documents whether there are medical contraindications to the use of specific behavior management interventions or behavior management techniques.
 - (e) An assessment completed by a certified or licensed practitioner of behavioral science that documents whether there are psychological or developmental contraindications to the use of specific behavior management interventions or behavior management techniques.
- (8) Specifications for supervision of the child.

(C) Service plan reviews:

- (1) The first service plan review shall be completed no later than ninety days after the initial service plan approval pursuant to paragraph (A) of this rule, all individuals involved in the development and implementation of a service plan shall be invited to review the entire plan and, in consultation with the individual or

agency having custody of the child, make any necessary amendments to the service plan.

- (2) For all subsequent reviews, the facility shall invite all individuals involved in the development and implementation of the service plan and the plan shall be completed no later than ninety days after the most recent review.
 - (3) The reviews shall be documented in the case record, and shall include an assessment of the current adjustment of each child and a determination of whether the child should remain in the facility.
 - (4) Each review shall receive written approval by a licensed social worker, licensed independent social worker, licensed professional counselor, licensed professional clinical counselor, or a civil service employee engaging in social work or professional counseling for a residential facility operated by a PCSA or an LPE.
 - (5) If a civil service employee is not a licensed social worker or licensed counselor, the employee shall not approve service plans for any other facility except a residential facility operated by the PCSA they are employed with.
- (D) A residential facility shall provide a written copy of the service plan and service plan review to the individual or agency that placed the child. The residential facility shall document that the service plan and service plan review was provided to the individual or agency that placed the child.

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TO BE RESCINDED

5180:2-9-14 **Medications.**

- (A) Upon admission to a residential facility the staff of the facility shall document any currently prescribed medications for the child in accordance with rule 5101:2-42-66.2 of the Administrative Code.
- (B) In consultation with the child's licensed health professional authorized to prescribe drugs, staff of each residential facility shall document each child's current regimen of medication:
 - (1) At the time of each semi-annual administrative case review.
 - (2) As often as directed and authorized by the child's licensed health professional authorized to prescribe drugs. A "licensed health professional authorized to prescribe drugs" has the same meaning as defined in section 4729.01 of the Revised Code.
- (C) A residential facility shall only make adjustments to the regimen of medication as authorized by the licensed health professional authorized to prescribe drugs.
- (D) In no event shall staff of a residential facility begin, alter, or suspend a child's or teenage mother's medication without the documented verbal or written approval of a licensed health professional authorized to prescribe drugs.
- (E) If a child misses dosages of the medication:
 - (1) For less than a forty-eight hour period, staff of the residential facility shall follow the instructions of the licensed health professional authorized to prescribe drugs or the pharmacy that filled the prescription before restarting the medication.
 - (2) For longer than a forty-eight hour period, staff of the residential facility shall contact the licensed health professional authorized to prescribe drugs or the pharmacist that filled the prescription and obtain written instruction on how to restart the medication.
- (F) Each staff person who is in any way responsible for administering medication to a child shall be provided with a written schedule of the child's medication. This schedule shall be maintained in each child's case record as required by rule 5101:2-5-10 of the Administrative Code and shall include, but is not limited to, the following instructions and information:

- (1) The name of the child.
 - (2) The name of each medication to be administered.
 - (3) The proper dosage of each medication to be administered.
 - (4) The timetable for administration of medication.
 - (5) Instructions regarding administration of medication.
 - (6) Information concerning possible side effects of each medication as indicated by a physician, pharmacist or a licensed health professional authorized to prescribe drugs.
- (G) No child shall be given any prescription medication which has not been prescribed for the child.
- (H) Each residential facility shall maintain a written cumulative record of all prescribed medication administered to a child during placement in the facility. The current record shall be located with the medication and shall reflect reasons for altered or missed dosages of prescribed medications.
- (I) All medication in a residential facility shall be stored in a safe place away from children except that an inhaler or other medication may be available to a person with a special health condition, who may need these for an emergency.

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5180:2-9-16 **Visiting and communications.**

- (A) A residential facility shall develop procedures to ensure that arrangements for visitation and communication between the child and family or friends are consistent with the case plan and that such arrangements are documented in the service plan.
- (B) A residential facility shall allow a child to send and receive mail subject only to the residential facility's rules regarding contraband and directives from the child's legal custodian when such rules and directives do not conflict with federal postal regulations. A residential facility shall not open or read a child's mail unless specified in the child's case plan and/or service plan and approved by the child's custodian. A residential facility may require the child to open mail in front of a staff person if contraband is suspected and empty the package or envelope.
- (C) A residential facility shall, in accordance with the service plan, allow a child access to a telephone which will permit the child to make and receive calls.
- (D) A residential facility shall, in accordance with the service plan, provide privacy for visits and telephone contacts.
- (E) A residential facility shall allow each child the opportunity to contact his or her attorney, caseworker, custodial agency worker, probation officer, court appointed special advocate (CASA) and guardian ad litem, by telephone or at the facility, in private, no later than twenty-four hours after the request is made by the child. If a child has a disability, the child shall have the opportunity to contact the state protection and advocacy organization.
- (F) A residential facility shall designate space, which is not space in which children live, to serve as an area for private discussions and counseling sessions between children and staff.
- (G) A residential facility shall ensure that a child who has access to electronic media within or outside of the facility while under the supervision of agency staff, which may include internet, cell phones and e-mail service, adheres to the agency's policy regarding communications.

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5180:2-9-17 **Child's money.**

- (A) Any money provided to or earned by a child shall be considered to be the child's money and not funds belonging to the staff or the residential facility.
- (B) A residential facility shall ensure that any child having the opportunity to receive or earn money has an account either at an established financial institution or in the residential facility for the safe keeping of such money.
- (C) If the account is maintained at the residential facility:
 - (1) A written record of the current balance, deposits, withdrawals, and any interest earned shall be provided upon request.
 - (2) At least every three months or at the time of discharge a written report of the current balance, deposits, withdrawals, and any interest earned shall be provided to the child.
 - (3) A copy of the written report shall be maintained in the child's record.
- (D) A residential facility may issue credit script to children, in lieu of legal tender, for use within the facility.
- (E) Funds belonging to a child kept at or by the facility shall be returned to the child:
 - (1) At the time of a planned discharge.
 - (2) Within ten days if the discharge is not planned.
- (F) A residential facility shall not charge a resident for an item required to be provided to the resident as required in Chapter 5101:2-9 of the Administrative Code unless the resident is learning life skills as part of an independent living program pursuant to rules 5101:2-42-19 and 5101:2-42-19.1 of the Administrative Code.

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5180:2-9-19 **Personal belongings, hygiene, socialization, and education.**

(A) A residential facility shall allow children in care to:

- (1) Acquire personal belongings.
- (2) Bring personal belongings with them.
- (3) Decorate bedrooms consistent with the limitations established by the residential facility and considering:
 - (a) The developmental stage of the child.
 - (b) The child's social, racial, cultural, religious, or ethnic background.

(B) Nothing in this rule shall be construed as preventing a residential facility from:

- (1) Supervising the use of a child's personal property.
- (2) Confiscating any items which:
 - (a) Pose a clear health or safety risk.
 - (b) Interfere with the rights or privileges of others.
 - (c) Are illegal to possess as a matter of state law or local ordinance.

(C) An agency shall make reasonable efforts to have the child present during a search of the child's personal belongings.

(D) A residential facility shall provide each child, in cooperation with the individual or agency holding custody of the child, with clothing and footwear which is clean, well-fitting, and seasonal. Clothing provided to a child shall be considered to be a child's personal property.

(E) Clothing provided by a residential facility shall be appropriate to the child's age and gender identity.

(F) A residential facility shall provide each child with adequate personal toiletry supplies. These supplies shall be appropriate to the child's age, gender identity, race, and cultural background and shall be considered to be the child's personal property.

- (G) A residential facility shall provide instruction on good habits of personal care, hygiene, and grooming. This instruction shall be appropriate to each child's age, gender identity, race, cultural background, and need for training.
- (H) A residential facility may assign a child daily tasks and work assignments on the grounds of or within the facility. Such assignments shall be of the type normally performed by a child and shall not be beyond the child's developmental ability to perform.
- (I) Daily tasks and work assignments made pursuant to paragraph (H) of this rule shall not place the child in physical danger and shall not interfere with the child's studies, normal social development, or child care responsibilities of a teenage mother.
- (J) A residential facility shall make arrangements with the person or agency placing a child for each school-age child to attend a school that complies with the minimum standards as prescribed by the state board of education and shall ensure that the child attends school in accordance with the child care agreement.
- (K) In accordance with the child's service plan, a residential facility shall encourage a child to participate in community, school, recreational, and cultural heritage activities which are appropriate to the child's age and functioning level and shall, as is necessary and reasonable, arrange appropriate transportation for the child to and from such activities.
- (L) A residential facility shall permit a child to practice the chosen religious faith of the child or his or her parent(s) and shall not subject a child to any form of religious coercion.
- (M) A child shall not be baptized or submitted to any religious procedures without prior consent of the child according to their age and functioning level and prior approval of the child's parent, guardian or custodian.
- (N) A residential facility shall, as appropriate, teach a child tasks and skills required for life in the community.
- (O) In accordance with section 5103.162 of the Revised Code, child care staff shall use the reasonable and prudent parent standard when considering whether to authorize a child who resides in the residential facility to participate in extracurricular, enrichment, and social activities in accordance with section 2151.315 of the Revised Code.

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5180:2-9-20

Food and nutrition.

- (A) A residential facility shall make available or make provision for each child to have available three nutritious meals per day scheduled at regular intervals. If more than four hours elapse between any two meals or if fourteen hours elapse between the evening meal and breakfast, a nutritious snack shall be served.
- (B) The resident's daily allowance of food shall meet the most recent dietary guidelines for Americans published by the food and nutrition information center of the United States department of agriculture (USDA). The most current guidelines can be accessed at <https://health.gov/dietaryguidelines/2015/guidelines/> (2015).
- (C) All meats served by the facility subject to inspection shall be inspected and graded by the federal or state department of agriculture.
- (D) A minimum of three daily servings of pasteurized milk, vitamin D fortified, shall be provided or made available in recommended amounts according to each child's age and sex.
- (E) A residential facility shall document that all agricultural, livestock, or dairy operations maintained by the facility conform to all applicable regulations adopted by the department of agriculture and the department of health.
- (F) Each children's residential center (CRC) shall prepare menus at least one week in advance. Cycle menus, if used, shall be at least three weeks long.
- (G) A residential facility shall not interfere with documented medical dietary restrictions or religious dietary restrictions of an individual child.
- (H) Meals provided by a residential facility for direct child care staff shall be the same as those provided for the children.
- (I) Formula for an infant prepared by or in a residential parenting facility or a children's crisis care facility shall be prepared in accordance with the instructions of the formula or by the techniques recommended by the attending physician which shall be on file at the facility.
- (J) Before preparing formula for an infant, all equipment used in the preparation and storage of the formula shall be thoroughly washed with hot water and detergent followed by a thorough rinsing in hot running water.

- (K) Formula for an infant to be stored at the facility for any period of time shall be labeled with the child's name and date of preparation.
- (L) Formula for an infant shall be refrigerated immediately after preparation and shall not be used more than twenty-four hours after preparation. The timeframe for use after preparation may be longer than twenty-four hours if directed by a physician or as documented in the instructions of the formula. The timeframe shall not be extended beyond the physician's recommendation or the instructions of the formula.
- (M) Formula for an infant shall not be heated in a microwave oven.

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5180:2-9-22 **Isolation, seclusion and restraint.**

- (A) Physical restraint and isolation shall only be used in accordance with written approval of a certified or licensed health care professional and a certified or licensed practitioner of behavioral science.
- (B) Physical restraint and isolation shall only be used in emergency circumstances when less restrictive interventions have been determined to be ineffective and only to ensure the immediate physical safety of the child, a staff member or others.
- (C) The use of physical restraint and isolation shall be limited to the following emergency situations:
 - (1) For protection of the child.
 - (2) To protect another person from a child.
 - (3) For self protection.
- (D) A residential facility shall isolate residents only in accordance with the facility's written policy which has received the prior approval of the Ohio department of job and family services (ODJFS).
- (E) Isolation shall only be used by a residential facility with an isolation room approved by ODJFS that meets the requirements of this rule.
- (F) Only one child shall be placed in an isolation room at a time.
- (G) A child shall not be isolated longer than fifteen continuous minutes without written supervisory approval.
- (H) A child shall not be isolated for longer than one continuous hour and no longer than a total of two hours in any twenty-four hour period.
- (I) A residential facility shall ensure that isolation is used exclusively for the behavior management of a child who is out of control at the time of isolation.
- (J) Any room used for isolation shall be lighted, well-ventilated, and maintained at the same temperature as the rest of the facility. The room shall be at least fifty-six square feet in size, and shall have a ceiling height of at least seven feet, six inches and shall be free of any objects or materials which might be used to inflict self-injury.
- (K) Any room used for isolation shall not be used for any other purpose, at any other time.

- (L) When a child is placed in isolation, staff shall inform the child of the reason for placing him or her in isolation. Before continuing a child's isolation, staff shall discuss with the child the need for continued isolation. Upon release from isolation, staff shall again discuss with the child the reason for the use of isolation.
- (M) Physical restraint and isolation shall only be utilized by staff who have current American red cross, American heart association or equivalent first aid and cardiopulmonary resuscitation (CPR) certification.
- (N) When isolation is used, the following procedures shall be followed:
- (1) Staff members shall ensure that a child who is placed in isolation is not in possession of any object or material which might be used to inflict self-injury and that only one child is placed in an isolation room at a time.
 - (2) Staff shall be in auditory contact with an isolated child at all times, and shall make visual observation of an isolated child every five minutes during the period of isolation.
 - (3) Visual observations as required by this rule shall be documented in an isolation log. The isolation log shall contain:
 - (a) The name of the child.
 - (b) The time of placement in isolation.
 - (c) The reason for the placement in isolation and the discussion of the reason for isolation with the child.
 - (d) The chronology of observations including the signature or initials of the staff who placed the child in isolation.
 - (e) The written supervisory approval of a child isolated longer than fifteen continuous minutes.
 - (f) The written approval of the administrator or designee for continued isolation of a child for any period of isolation longer than thirty minutes.
 - (g) The time of removal from isolation.
- (O) No child under the age of six shall be isolated.
- (P) Any restraint techniques used to restrain a child shall be previously approved and listed in the behavioral intervention policy of the residential facility.

- (Q) The physical restraint or isolation shall end when the child becomes calm or when the child's behavior no longer constitutes an emergency.
- (R) Residential facilities that utilize either physical restraint or isolation, or both, shall provide all administrators and child care staff with training in the use of physical restraint or isolation, or both, pursuant to rule 5101:2-9-03 of the Administrative Code.

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5180:2-9-23

Notification and documentation of critical incidents.

(A) A residential facility shall notify the individual or agency which placed the child and the person or agency holding custody, if different, within twenty-four hours if any of the following occur while the child is placed in the facility:

- (1) Death of the child or teenage mother.
- (2) Absent without leave (AWOL) and the return from AWOL.
- (3) Any serious injury or illness involving initial non-routine medical treatment.
- (4) Expulsion or suspension from school.
- (5) Any alleged delinquent or criminal activity of the child or teenage mother;
- (6) Any situation in which the child or teenage mother is a victim of alleged delinquent or criminal activity;
- (7) Suicide or self-mutilation attempts.
- (8) Any incident of alleged abuse or neglect.
- (9) Any involvement with law enforcement.
- (10) Any use of physical restraint or isolation pursuant to rule 5101:2-9-22 of the Administrative Code;
- (11) Any other unusual incident as defined in the agency's policies or by the agency.

(B) A residential facility shall complete a critical incident report for each occurrence of any of the items listed in paragraph (A) of this rule and shall document that the report was provided no later than the next business day after the occurrence to the individual or agency which placed the child and person or agency holding custody, if different. All critical incidents involving restraint or isolation shall be completed on the JFS 01386 "Restraint and Isolation Incident Report" (4/2019) or a facility equivalent form and a copy of this form shall be placed in the aggregate data log as described in paragraph (B) of rule 5101:2-9-35 of the Administrative Code. If the facility uses its own equivalent form, it may be either a physical form or an electronic form and the form shall, at a minimum, capture all the information listed on the JFS 01386.

(C) Reports of child abuse and neglect in a residential facility.

- (1) Pursuant to section 2151.421 of the Revised Code, the following persons shall immediately report a situation listed in paragraph (C)(2) of this rule:
 - (a) Administrator.
 - (b) Employee.
 - (c) College intern.
 - (d) Volunteer.
- (2) An individual listed in paragraph (C)(1) of this rule shall make a report when they know or suspect any of the following:
 - (a) Physical abuse.
 - (b) Mental abuse.
 - (c) Sexual abuse.
 - (d) Exploitation.
 - (e) Neglect.
 - (f) Threatened abuse or neglect.
- (3) A report shall be made when the offense is committed by any person, including another resident of the facility.

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5180:2-9-24

Child and family complaint policy and procedure.

- (A) The residential facility shall have a complaint policy and procedure written in clear and simple language that shall be given and explained to the child and family at the time of the child's admission to the residential facility. Documentation that the child and family received the complaint policy and procedure shall be placed in the child's file.
- (B) The residential facility shall ensure that a child or family member is not required to transmit a complaint through the staff member who is the subject of the complaint.
- (C) The residential facility shall ensure against retaliation by staff or by other children against the person making the complaint.
- (D) Complaints in a residential facility.
 - (1) A residential facility shall:
 - (a) Establish a procedure to make every effort to ensure that any complaint is resolved within thirty days of the filing of the complaint.
 - (b) Ensure unresolved complaints are reviewed by the administrator of the facility or designee within thirty days of the filing of the complaint.
 - (2) For any complaint not resolved within thirty days, a written explanation of the reason why the complaint has not been resolved within thirty days shall be placed in the child's record maintained pursuant to rule 5101:2-5-10 of the Administrative Code.
 - (3) A written report of each complaint and the resolution shall be compiled and a copy placed in the child's record maintained pursuant to rule 5101:2-5-10 of the Administrative Code.

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5180:2-9-28

Bedrooms.

- (A) All bedrooms contained within a children's residential center (CRC) shall have seventy-four square feet for the initial occupant and an additional fifty square feet for each additional occupant, and a ceiling height of at least seven feet, six inches.
- (1) If a residential facility certified prior to the effective date of this rule has an approved variance for the square footage requirement, the facility may still remain in operation as long as the agency has a copy of the approved variance on file for review by ODJFS.
- (2) All facilities certified after the effective date of this rule shall adhere to the square footage requirements of this paragraph.
- (B) Bedrooms in a CRC or group home shall be used to sleep children of the same sex.
- (C) No bedroom in a residential facility, constructed or put into use after January 1, 1991, shall be used to sleep more than four children.
- (D) A residential facility shall not permit non-ambulatory children to sleep above the entry level of a building, unless the facility is specifically approved for such children by the state fire marshal or a local certified fire safety inspector.
- (E) Each bedroom in a residential facility shall have at least one outside wall window. The window shall be equipped with a means for providing privacy. The window shall also be screened and capable of opening and closing, unless the room is provided with a ventilation system which provides a regular change of fresh air such as a central air conditioning system.
- (F) Each CRC utilizing live-in child care staff shall provide such staff with separate sleeping space and bathroom facilities.
- (G) Each group home or residential parenting facility utilizing live-in child care staff shall provide such staff with separate sleeping space.
- (H) Bedrooms in a residential facility shall not have the entry to a child's bedroom located so as to require the child to pass through another bedroom or a bathroom in order to enter his or her bedroom, or to require another person to pass through the child's bedroom to enter another room.
- (1) If a residential facility certified prior to December 1, 2010 has an approved variance for the pass through requirement, the facility may still remain in

operation as long as the agency has a copy of the approved variance on file for review by ODJFS.

- (2) All facilities certified after the effective date of this rule shall adhere to the pass through requirements of this paragraph.
- (I) All bedrooms in a residential facility shall have a standard door that is capable of opening and closing.
- (J) Each bedroom in a residential facility shall have one bed for each child assigned to the bedroom. Beds shall not be less than thirty inches wide and not less than five feet in length and appropriate to the child's size. Each bed shall have a clean and comfortable mattress. A child's bed shall not be used by another child when the child is temporarily away from the facility.
 - (1) If a residential facility certified prior to December 1, 2010 has an approved variance for any requirement of this paragraph, the facility may still remain in operation as long as the agency has a copy of the approved variance on file for review by ODJFS.
 - (2) All facilities certified after December 1, 2010 shall adhere to the requirements of this paragraph.
- (K) Each child in a residential facility shall be provided with clean sheets, pillowcases, a pillow, and blankets.
- (L) Sheets and pillowcases shall be changed and laundered at least weekly or more frequently if needed. Waterproof mattress coverings shall be provided to a child as needed.
- (M) All bunk beds in use in a residential facility shall be equipped with safety rails on the upper tier for a child under the age of ten, or for any child whose physical, mental, or emotional condition indicates the need for such protection. A child under six years of age shall not sleep on the upper bunk of a bunk bed. No beds shall be bunked higher than two tiers. Bunk beds shall not be used in a residential parenting facility.
- (N) Each child in a residential facility shall be provided with storage space for clothing and personal items in the bedroom to which the child is assigned. Each teenage mother in a residential parenting facility shall be provided with storage space for herself, and for her child's clothing, in her bedroom.
- (O) Each child in a residential facility shall be provided with space in their bedroom for hanging clothes. Each teenage mother in a residential parenting facility shall be provided with space in her bedroom for hanging clothes for herself and her child.

- (P) If a residential facility removes any required items from a child's bedroom, the facility shall document the reason for the removal and shall have a statement showing the removal of the items was necessary for the safety and well being of the child signed by one of the following:
- (1) A licensed social worker.
 - (2) A licensed independent social worker.
 - (3) A licensed professional counselor.
 - (4) A licensed professional clinical counselor.
 - (5) A civil service employee engaging in social work or professional counseling for a residential facility operated by a public children services agency (PCSA) or a local public entity (LPE) as described in rule 5101:2-5-02 of the Administrative Code. If a civil service employee is not a licensed social worker or licensed counselor, the employee shall not sign statements for any other facility except a residential facility operated by the PCSA they are employed with.
- (Q) In a residential parenting facility, no teenage mother and her child shall share a bedroom with another teenage mother and her child.
- (R) In a residential parenting facility, each teenage mother shall have a bed of her own and shall not be permitted to sleep with her child in the same bed.
- (S) Each infant, toddler or preschool age child shall have an age appropriate bed. A bassinet shall be used only for infants under three months of age or less than fifteen pounds in weight. An infant or toddler under thirty-five inches in height shall be provided with a full sized crib which meets the following requirements:
- (1) Crib slats shall be no more than two and three-eighths inches apart.
 - (2) Decorative cutout areas on crib end panels which could entrap the head of a child shall not be used.
 - (3) Drop-side cribs shall not be used.
 - (4) Each crib shall have a firm mattress which is at least one and one-half inches thick and covered with a waterproof material. The mattress must fit snugly enough in the frame so that there is no more than a one and one-half inch gap between the mattress and the sides of the crib.

- (5) The facility is responsible for monitoring for recall and safety information as issued by the consumer product safety commission (CPSC), and ensuring that CPSC recommendations related to equipment used by the facility are followed.
- (6) Only cribs that are compliant with the U.S. consumer product safety commission specifications shall be used. The specifications can be found in 16 C.F.R. 1219 (2011).

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TO BE RESCINDED

5180:2-9-29

Bathrooms.

- (A) A residential facility with bathrooms that have more than one toilet, sink, bath or shower shall have one bathroom for every six children of the same sex, or fraction thereof.
- (1) Each sink shall have hot and cold water.
 - (2) Each toilet shall be capable of flushing.
 - (3) Each bath or shower shall have hot and cold water.
- (B) If a residential facility has a private, single bathroom containing one sink, one flush toilet, and one bath or shower, the bathroom may be used to meet the ratio requirement of one bathroom for every six children, or fraction thereof.
- (1) The sink shall have hot and cold water.
 - (2) The toilet shall be capable of flushing.
 - (3) The bath or shower shall have hot and cold water.
- (C) Children at a crisis care facility who are still using diapers and under the age of three shall not be counted in the bathroom ratio requirements of paragraphs (A) and (B) of this rule.
- (D) A children's residential center (CRC) shall have at least one bathroom with a toilet and sink on the floor with the sleeping rooms.
- (E) Bathrooms in a residential facility shall be situated so as to allow direct access to them without the necessity of passing through a bedroom, except when a bedroom has an attached bathroom used only for the children who reside in that bedroom.
- (F) Each bathroom in a residential facility shall have toilet paper, towels or air dryers, soap, and wastebaskets available for use.
- (G) Bathtubs and showers in a residential facility shall have nonskid surfaces.
- (H) Except for bathtubs exclusively used to bathe children age zero to three in a crisis care facility, all bathtubs and showers in a residential facility shall have enclosures or screens which afford individual privacy. When more than one toilet is located in the same bathroom, each toilet shall be partitioned and include a door capable of remaining closed.

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5180:2-9-30 **Kitchens and kitchen supplies.**

- (A) Each children's residential center owned or operated by a private child placing agency (PCPA) or private noncustodial agency (PNA) shall secure a food service license for each kitchen in which meals are prepared in accordance with the requirements of Chapter 3717. of the Revised Code and Chapter 3701-21 of the Administrative Code pertaining to food service operation as administered and enforced by the local department of health.
- (B) Each kitchen within a residential facility shall have:
 - (1) Permanent or disposable utensils.
 - (2) Appliances for storage and preparation of meals served in the facility.
- (C) Each food serving location within a residential facility shall provide the following permanent or disposable items in sufficient quantity to serve the population assigned to eat at that location:
 - (1) Serving dishes.
 - (2) Cups or glasses.
 - (3) Silverware.
- (D) In those cases where a residential facility living unit does not have access to a kitchen, the living unit shall be equipped with equipment that allows the preparation of light snacks.

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5180:2-9-32 **Transportation.**

- (A) A residential facility shall ensure that all necessary transportation is made available for implementing each child's service plan.
- (B) Vehicles owned, rented or leased by a residential facility that are used to transport children shall meet all of the following requirements:
 - (1) All vehicles used for transporting children of the facility shall be annually inspected and approved by the Ohio state highway patrol and continually maintained in a safe operating condition.
 - (2) Each facility shall maintain written maintenance records on all vehicles which are used for transporting children.
 - (3) First aid supplies shall be located in each when the vehicle is used to transport children.
 - (4) All vehicles shall be maintained in a safe condition and in compliance with all motor vehicle laws and shall be covered by liability insurance in accordance with current state laws.
- (C) Vehicles privately owned, rented or leased that are used by a residential facility to transport children shall meet all of the following requirements:
 - (1) All privately owned vehicles used to transport children of the facility shall be annually inspected and approved by the Ohio state highway patrol and continually maintained in a safe operating condition.
 - (2) The residential facility shall keep current documentation of automobile insurance for all privately owned vehicles used to transport children of the facility.
 - (3) First aid supplies shall be located in each privately owned vehicle when the vehicle is used to transport children of the facility.
 - (4) All privately owned vehicles used to transport children of the facility shall be maintained in a safe condition and in compliance with all motor vehicle laws and shall be covered by liability insurance in accordance with current state laws.
- (D) Each residential facility shall ensure that any employee shall have a valid driver's license when transporting children in either a privately owned vehicle or a vehicle owned by the facility.

- (E) Each residential facility shall ensure that supervision appropriate to the number and ages of children being transported is available in any vehicle used by the facility to transport children.
- (F) In a vehicle which is required by law to be equipped with passenger safety belts, the driver and all passengers shall be properly restrained by a safety belt while the vehicle is in motion.
- (G) Children less than four years old or forty pounds in weight shall be restrained in a child restraint seat secured by a safety belt or the lower anchors and tethers for children (LATCH) system. The child restraint seat shall not be placed in the front seat of any motor vehicle that has a back seat.
 - (1) An infant less than one year of age or twenty pounds in weight shall be restrained only in a rear-facing position and, whenever possible, shall not be placed in the front seat of a motor vehicle equipped with passenger air bags.
 - (2) Children at least one year old and between twenty pounds and forty pounds in weight shall be restrained in a forward-facing position.
- (H) If paragraph (G) of this rule does not apply and the child is less than eight years of age and less than four feet nine inches in height, the child shall be properly restrained in a booster seat. The booster seat shall be placed in the back of any motor vehicle that has a back seat.
- (I) If paragraph (G) of this rule does not apply and the child is at least eight years of age but not older than fifteen years of age, the child shall be restrained in a belt positioning booster seat in a forward-facing position or in a seat belt including both a lap belt and a shoulder belt in vehicles that are so equipped.
- (J) Each residential facility shall ensure the recall and safety information issued by the consumer product safety commission (CPSC) related to child safety seats or booster seats are reviewed. Any safety recommendations made by the CPSC in regard to child safety seats or booster seats shall be implemented by the facility.
- (K) Whenever possible, all children age twelve and under, when riding in a motor vehicle equipped with a back seat, shall not ride in the front seat of the vehicle.
- (L) Paragraphs (G), (H) and (I) of this rule do not apply to a residential facility who has a signed affidavit by a licensed physician in Ohio or a licensed chiropractor in Ohio. The affidavit shall state that the child who otherwise would be required to be restrained, has a physical impairment that makes use of a child restraint system, booster seat, or an occupant restraining device impossible or impractical, provided the person

operating the vehicle has safely and appropriately restrained the child in accordance with any recommendation of the physician or chiropractor as noted on the affidavit.

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