

Received: 4/29/2026 @ 11:23am

Ohio Department of Job and Family Services
WARN Notice Submission Form (JFS 00039)



Thank you for contacting Ohio's Rapid Response Unit to submit your WARN Notice. This submission form will help you successfully submit your WARN Notice for state processing and public posting purposes.

Please also include a Worker List with your completed WARN Notice submission form. (see page 3)

It is the employer's responsibility to notify your elected government official for the county where this mass layoff or closure will take place, in addition to submitting this WARN Notice submission form. To locate your municipal corporation and county elected government official, please visit: [Ohio Elected Official Roster](#) (pg. 22)

When completed, please email this WARN Notice submission form, along with your Worker List, to the Rapid Response mailbox: rapdresp@jfs.ohio.gov. You will be notified within 24 hours (M-F) that the Rapid Response Unit received your WARN Notice. Next, a Rapid Response Coordinator will follow up to offer no-cost services, such as unemployment benefit information, re-employment and training assistance for your affected employees, through this time of transition and change.

Please do not hesitate to contact the Rapid Response mailbox at any point during this submission process: rapdresp@jfs.ohio.gov. The state of Ohio is here to help!

Section 1. Terms and Conditions

The Ohio Department of Job and Family Services (ODJFS) maintains this WARN Notice submission form (JFS 00039) when publicly accessed through the ODJFS WARN Notice website. By completing this WARN Notice submission form, you agree to these terms and grant ODJFS permission to distribute, reformat and publicly display your WARN Notice in accordance with federal and state laws and regulations. As a public agency, ODJFS is subject to the requirements of the Ohio Public Records Act. Please be aware your WARN Notice submission form (JFS 00039) is not confidential or an exempt record under Ohio and federal laws and will be posted for public access. Information received via the ODJFS WARN website as well as this WARN Notice submission form, should not be relied upon for personal, legal or financial decisions and you should consult an appropriate professional for specific advice tailored to your situation. *Worker Lists submitted with employee contact information are excluded from public access and will be handled confidentially; see page 3.

I have read and agree to these Terms and Conditions: YES NO

Signature 	Date 04/29/2026
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Section 2. Employer Information

Employer Name Optalis Professional Services LLC
Employer Address (Street, City, Zip code) 25500 Meadowbrook Rd. Suite 230, Novi, MI 48375
Federal Employer Identification Number (FEIN) (If Available) 84-2318500
North American Industry Classification System (NAICS Code) (If Available) Nursing Home
Please describe the actions taken to mitigate the impact of the employment loss. Pickaway Manor will no longer be managed by Optalis Healthcare. Pickaway manor has hired a new management company.

Section 3. Reason for Layoff/Closure (Check all appropriate)

Financial Difficulties	<input type="checkbox"/> YES	Mergers and Acquisitions	<input type="checkbox"/> YES
Economic Downturn	<input type="checkbox"/> YES	Strategic Shifts	<input type="checkbox"/> YES
Technological Advancements that impact Human Labor	<input type="checkbox"/> YES	Supply Chain Issues	<input type="checkbox"/> YES
Market Competition	<input checked="" type="checkbox"/> YES	Natural Disasters	<input type="checkbox"/> YES
Decline in Demand for Product or Service	<input type="checkbox"/> YES	Debt Obligations	<input type="checkbox"/> YES
Regulatory Changes	<input type="checkbox"/> YES	Other	<input type="checkbox"/> YES

Section 4. Facility Information where Layoff/Closure is Taking Place

Is the Layoff/Closure taking place at the Employer address listed in Section 2: Employer Information?

YES NO

If the Layoff/Closure is NOT taking place at the Employer address in Section 2, please enter additional Facility location/s (Facility Name, Address, City, Zip code)

Pickaway Manor an Optalis Health and Rehabilitation Center ,391 Clark Drive , Circleville OH 43113

Contact Person/s for additional Facility address (Name, Email Address, Phone Number)

Tressa Sanders 25500 Meadowbrook Rd. Suite 230,Novi, MI 48375 , (248) 817-7640 tressa.sanders@optalishealthcare.com

*If there is more than (1) Facility Location where Layoff/Closures are taking place, please include # of Affected Employees at each facility location.

Section 5. WARN Notice Details

Type of Notice (Temporary Layoffs lasting less than (6) months do not require WARN Notice Submission)

Closure: YES **Layoff:** YES

Does this amend/change/update an existing WARN Notice already filed? YES NO

If this submission amends, changes, updates an existing WARN Notice, please explain how.
(Date Change; Number of Affected Employees, etc.)

This Layoff/Closure will take place on (1) date for all affected employees: YES **Layoff/Closure Date:** 6/30/2026

This Layoff/Closure will involve a phased series of layoffs (multiple dates) for all affected employees: YES

Please list your phased series of layoffs by Date of Layoff and Number of Affected Employees for each phase.
(If layoffs occur at more than (1) facility, please list facility name per phase)

Dates and/or Date Ranges of Phased Layoffs	# of Affected Employees	List Facility Location IF Layoff/Closure is Occurring at more than (1) Facility
1.		
2.		
3.		
4.		
5.		
6.		

Section 6. Affected Employees

Total Number of Affected Employees (Enter Number)

122

The Ohio Department of Job and Family Services (ODJFS), in accordance with the Worker Adjustment and Retraining Notification (WARN) Act and Ohio Revised Code § 4113.31, requests that employers submitting a WARN Notice also provide a list of affected employees. This list should include the following information for each impacted individual:



- Job Title
- Anticipated Layoff Date
- Full name
- Phone number and/or Email address

Pursuant to Ohio Revised Code Chapters 1347 and 149, and applicable federal confidentiality laws, all employee contact information provided to the Ohio Department of Job and Family Services (ODJFS) shall be treated as confidential and exempt from public disclosure. ODJFS shall not initiate contact with any listed employees without the employer’s prior consent and/or until after the effective layoff date. Employers retain full discretion over the timing and method of communication with affected employees. Access to such information is restricted to authorized personnel and used exclusively for the administration of workforce development programs, including Rapid Response services under the Workforce Innovation and Opportunity Act (WIOA).

[Click here: “Ohio WARN Notice Requirements & Forms” to download a WARN Notice Worker List Spreadsheet \(JFS 00040\) for convenience.](#) Attach Worker List when emailing your WARN Notice to: rapdresp@jfs.ohio.gov

Section 7. Additional Information

Does your business have Union Representation?

YES NO

If your business is represented by a Union/s, please provide the Union Name, Union Representative Name, Email Address, Phone Number.

N/A

Will Bumping Rights be in Place for the Affected Employees?

YES NO

Will Severance be available for the Affected Employees?

YES NO Unknown

Will you provide information on how affected employees can access unemployment insurance benefits?

YES NO Unknown

Will you provide information about available services for the affected employees, including job placement assistance, retraining programs, or counseling.

YES NO Unknown

Section 8. Company Contact

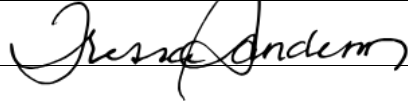
Enter **Company Contact Person's** Name, Phone Number and Email Address if the Ohio Department of Job and Family Services has additional questions pertaining to this WARN Notice.

Tressa Sanders (248) 817-7640 tressa.sanders@optalishealthcare.com

Section 9. Employer Certification

By signing this form, I attest to the best of my knowledge that the WARN Notice information submitted on behalf of my company is complete and accurate.

Signature



Date

04/29/2026

Please send completed WARN Notice Submission Form and Worker List to rapdresp@jfs.ohio.gov

Worker List:

Activities Manager	1
Activities Staff	3
Administrator	1
Admissions and Market Director	1
Business Office Manager	1
Clerical Staff-IT Staff	2
CNA - Medicare	44
Cook Staff	5
Culinary Team Member	2
Dietry Staff	5
Director of Nursing	1
Floor Tech	1
Food Services Director	1
Housekeep and Laundry Manager	1
Housekeeper	7
HR Business Partner	1
Laundry Staff	4
LPN - Medicare	15
LPN Charge Nurse	2
Maintenance Staff	2
MDS Coordinator	1
Medical Records Coord	1
Nurse Aide	7
RN - Medicare	9
RN ADON	1
Social Services Clerk	1
Staffing Coordinator	1
Wellness Director	1
Total:	122