

Effective 03/2017

ODJFS

Foster Care Licensing

Procedures Manual

TABLE OF CONTENTS	
Chapter 1	Initial Certification Studies
Chapter 2	Re-certification Studies
Chapter 3	Temporary Certificates
Chapter 4	PCSA Foster Care Review
Chapter 5	Additional Visits
Chapter 6	Complaints and Child Fatality Review
Chapter 7	Amendment and Closure Studies
Chapter 8	Criminal Background Check Compliance Reviews
Chapter 9	Summary of Findings of Noncompliance, Corrective Action Plans, and Appeals
Chapter 10	Self-Reports and Technical Assistance
Chapter 11	Licensed by Other Entity, Illegal Operation
Chapter 12	License Review Committee and Enforcement
Chapter 13	Policy/Plan/Proposal Review
Chapter 14	Communication and Record Retention
Chapter 15	Waivers and Variances
Chapter 16	Teaming
Glossary of Terms	

Purpose - Authoritative Charge

The Bureau of Foster Care Licensing within the Office of Families and Children (OFC) of the Ohio Department of Job and Family Services (ODJFS) is responsible for ensuring the adequate and competent management of agencies that offer care to children in out-of-home settings. Particularly, ODJFS –through the Bureau –must pass upon the fitness of agencies that provide foster care, adoption, and residential services to children and/or their families. Public Children Service Agencies (PCSA), Private Noncustodial Agencies (PNA), and Private Child Placing Agencies (PCPA) are monitored by the Section to ensure compliance with administrative, governance, fiscal, child services and treatment, and operational standards as prescribed by the Ohio Revised Code (ORC) and Ohio Administrative Code (OAC) in:

- ORC [Chapter](#)s: [5103](#) and 3107;
- OAC [Chapter](#)s: [5101:2-01](#), [5101:2-05](#), [5101:2-7](#), [5101:2-9](#), [5101:2-48](#); and
- OAC [Chapter](#)s: [5101:2-33](#); [5101:2-39](#), [5101:2-42](#), [5101:2-44](#), [5101:2-47](#), and [5101:2-52](#).

FCLPM – Compliance Scope

Compliance is measured against applicable Codes that govern the functions for which each agency is certified or approved to operate. The Foster Care Licensing Procedures Manual (FCLPM) gives account to how the **Bureau** collectively manages its responsibilities of assuring adequate Code compliance and agency “fitness” (ORC 5103.03). The FCLPM is a compilation of procedures established to assist Agency Licensing/Certification staff. Since its inception in 1991, the FCLPM has been utilized to provide instructions to Licensing/Certification staff on how to complete and process compliance “studies”. The FCLPM is arranged by chapters and covers the various studies conducted and completed by staff relative to ODJFS certification and approval processes. The FCLPM refers to studies as a series of announced and unannounced inspections and/or investigative reviews. Studies are conducted by Agency Licensing/Certification Specialists throughout the agency’s certification/approval period. The FCLPM is utilized by the Bureau to promote consistency in conducting and completing compliance studies. Agency Licensing/Certification Specialists and their managers rely on information obtained through studies to determine whether an individual agency meets the acceptable level of Code compliance.

Overview of FCLPM Activities

On average, 300 agencies are inspected by Agency Licensing/Certification staff. This may include over 1200 physical site inspections, policy and/or record reviews, and interviews of child residents, foster parents, and/or agency staff. All inspections and onsite agency visits are conducted during business hours between 8:00 am and 5:00 pm, excluding travel time, unless the licensing supervisor has been notified and agency is in agreement. At each entrance conference, the length of time needed to complete each study is established with the agency. At the conclusion of each on-site inspection and other activities listed above, the assigned licensing/certification specialist will complete the relevant review tool(s), share findings with the agency, compile review material and forward to the field office licensing supervisor for review and approval. The supervisory staff does review and approve the work performed by the Agency Licensing/Certification specialists to ensure accuracy, completeness, and consistency throughout the Ohio Foster Care Licensing program (OFCL). Refer to the OFCL User Guide for further information. Procedures that fall outside of routine must be shared and conferred with Section management.

Agencies Subject to the FCLPM

Types of agencies subject to monitoring by the Licensing/Certification Section are: Public Children Services Agencies (PCSA); Private Child Placing Agencies (PCPA); Private Non-custodial Agencies (PNA); Licensed

Public Entities (LPE); and Private, Non-profit, Therapeutic Wilderness Camp (PNTWC). Pursuant to OAC Chapter 5101:2-5, agency functions that require ODJFS certification (C) or approval (A), that are monitored by Agency Licensing/Certification staff are reflected in the following chart:

Certification (C) or Approval (A)	PCSA	PCPA	PNA (including most LPEs)
1. To operate children’s residential center(s)	C	C	C
2. To operate group home(s)	C	C	C
3. To operate residential parenting facilities	C	C	C
4. To operate crisis care facilities	C	C	C
5. To operate a private, non-profit, therapeutic wilderness camp		C	C
6. To operate or provide Independent Living arrangements		C	C
7. To act as a representative of ODJFS in recommending pre-adoptive infant foster homes for certification	A	C	C
8. To act as a representative of ODJFS in recommending family foster homes for certification	A	C	C
9. To act as a representative of ODJFS in recommending treatment foster homes for certification	A	C	C
10. To act as a representative of ODJFS in recommending medically fragile foster homes for certification	A	C	C
11. To accept temporary, permanent or legal custody of children		C	
12. To place children for foster care or adoption.		C	
13. To participate in the placement of children in foster homes			C
14. To participate in the placement of children for adoption			C

Procedures Found in the FCLPM

Procedures contained in the FCLPM lend answers to the following questions:

- How to respond to questions from potential new applicants (inquiries);
- How to process JFS 01290 applications, including required supporting documentation;
- How to compile study documentation using the Ohio Foster Care Licensing System;
- How to complete PCSA reviews and recommend approval;

- How to recommend issuances and/or approval (e.g., Two-year or Temporary certifications, PCSA approval, and Waivers);
- What are the general timelines (*) for completing studies, i.e., Initials, Recertifications, Amendments, Additional Visits, Plans, Policies, Proposals, and Closures;
- How to conduct record reviews and interviews (e.g., agency staff, parents, and child residents);
- How to treat illegal operations, complaints, and reports of child fatalities;
- How to conduct a Teaming review;
- How to conduct ad hoc reviews, e.g., Additional Visits, and visits to Foster Homes;
- How to address serious and risk rule noncompliance;
- When to provide Technical Assistance;
- How to initiate Enforcement and/or response to requests for public information; and
- How to process agency appeals relative to findings of noncompliance.

(*) Reasonable Expectations

Licensing activities outlined in the FCLPM are vital to the success of the Licensing/Certification Bureau. Agency Licensing/Certification staff therefore strive to meet the expectations and time frames identified throughout the chapters of the FCLPM. However, on occasion, particularly in cases of high workloads and staff shortages, competing priorities and pressing deadlines often impede specialists' and/or managers' ability to meet prescribed deadlines. In such cases, "reasonable expectations" will be specified through management directives and utilized to determine expectations that drive licensing activities.

Updates and Modifications

The FCLPM may be updated as deemed necessary by the FCLPM Review Committee. Newly posted and revised procedures are then added to the FCLPM when updated. The FCLPM is fluid and there are plans to update it in 2021 to support automated system and rule changes, but in an effort to be transparent and in response to requests we have received, we are publishing the entire Procedure Manual.

Limitations

The FCLPM does not supersede federal law; Ohio Revised Code (ORC), Ohio Administrative Code (OAC), or any protocol established by the Ohio Department of Job and Family Services, the Office of Families and Children, and is not legally binding.

I. Purpose

The purpose of an initial certification is to assess the applicant to determine compliance with all pertinent Ohio Revised Code and Ohio Administrative Code relative to the applicant's intended function(s).

II. Initial Inquiries

- A. An initial inquiry is established when an individual or agent not currently certified by ODJFS or a PCSA submits a completed online inquiry/survey through the ODJFS Foster Care Licensing website (<http://jfs.ohio.gov/OFC/FosterAgencyLicensing.stm>). Inquiries regarding Initial certification are received through the Foster Care_Licensing Outlook mailbox by the district office licensing supervisor with responsibility for the county in which the inquiring agency's primary office will be located. Based on the responses, the supervisor will:
1. Screen for ODJFS jurisdiction. When the licensing supervisor determines that the inquiry falls outside ODJFS jurisdiction (documents indicate the information falls under the jurisdiction of another licensing authority such as ODMHAS), the supervisor shall send a return email within three (3) business days that ODJFS does not have jurisdiction and provide contact information for other licensing entities.
 - a. Inquirers Performing Illegal Functions or Currently Licensed by Other Entities: If the inquirer is performing a function that requires a certificate, refer to timelines and procedures listed in SOPM Chapter 11: Agencies Licensed by Other Entities or Illegal Operations. For agencies licensed by other state entities that are seeking certification by ODJFS, please refer to Chapter 11, Section II.
 2. If ODJFS jurisdiction is affirmed, the licensing supervisor shall assign to a licensing specialist on a rotating basis and document the assignment in the Inquiry Log located in a district office folder on the Q Drive. The supervisor shall file the inquiry email in the assigned district office folder in the Foster Care_Licensing mailbox in Outlook as documentation.

III. Initial Application Process

- A. Once the inquiry is assigned, or if the inquirer requests an application, the licensing specialist shall send an email (attaching the Append D) or attempt to make telephone contact with the inquirer within three (3) business days. At the time of initial contact, the specialist shall provide the Append D information (if it has not been sent), and set up

a technical assistance phone or face-to-face meeting to discuss the application process and next steps. Items to be discussed:

1. Dates for upcoming New Agency/New Administrator training and registration information
2. General expectations for reporting child abuse and neglect and full compliance on background checks (zero tolerance)
3. Provide Title IV-E contact information if applicable:

<http://jfs.ohio.gov/ofc/titleiveprograms> or Help Desk at 1-866-886-3537 option 4.

4. The existence of the Statewide Automated Child Welfare Information System (SACWIS) and the participation with SACWIS is a condition of certification. SACWIS is an interactive system of databases maintained by ODJFS to store data from public and private agencies that care for children in and out of custody.
5. Private agency inquirers who wish to recommend foster home certification and/or adoption approvals must complete the JFS 01318 "SACWIS Private Agency Provider Request" form when certifying or approving each home. Advise the inquirer they must notify SACWIS at the number below to be set up and access the SACWIS system.
6. Private agency inquirers who wish to operate residential facilities should be advised that the names and addresses of their facilities would be entered in SACWIS by ODJFS. This information is then maintained by ODJFS and utilized by placing agencies following Initial certification.
7. Provide the OFC website for further information on resources. <http://jfs.ohio.gov/ofc>, the Help Desk number for OFC 866-886-3537, option 4, and the phone number for the SACWIS Help Desk at 1-800-686-1580 or 614-466-0978 if applicable.
8. The assigned licensing specialist will request and review the inquirer's proposed Articles of Incorporation to determine if the incorporators "are reputable and respectable persons, the proposed work is needed, and the incorporation of such association is desirable and for the public good".

Note: This examination, required of ODJFS in ORC Section 5103.04, has never been given any more specific parameters than those stated in the statute. Language detailed in the articles of incorporation should describe the functions for which the

agency is seeking certification to operate. Any questions regarding this review should be directed to the licensing supervisor. If the proposed articles are approved by the licensing specialist, the specialist shall send the Appendix C (Proposed Articles of Incorporation), along with the Articles of Incorporation to the inquirer and instruct them to forward these documents to the Secretary of State's office.

9. If the agency is already incorporated (i.e., Articles of Incorporation have been previously filed with the Secretary of State), the agency needs to submit a copy of the Articles (or amended Articles) to the assigned licensing specialist. The Articles must be examined to determine if the stated purpose(s) describes what the agency is currently proposing to do. Any questions regarding this review should be directed to the licensing supervisor. Requirements that are identified in the Appendix D. If the inquirer declines the meeting the specialist shall electronically send the Appendix D (Application for Certification Letter), along with the Appendix MM (Agency Policy, Plans, & Procedures Development Tool).
- B. Upon receipt from an inquirer of the *JFS 01290 Application for Certification of Agency Functions*, the assigned licensing specialist will assign a case study number to the application. The New Application Log on Q:/drive in the appropriate Field office folder must be updated with the required information. The log tracks assigned numbers and the specialist will use the next sequential number. The numbering sequence is determined by using the assigned Field office number (01: Columbus; 02: Dayton; 03: Toledo; 04: Cleveland; 05: Akron), the sequential number of the application and the current year. Examples would be 010109 for the first *JFS 01290 Application for Certification of Agency Functions* received in 2009 and then calculating forward, 010209; 010309.
- C. The assigned licensing specialist shall create and track new study using OFCL using the sequential number assigned in the New Application Log on Q:/drive, recording in the Comment Section the date of receipt of the application, and "SAVE". The Certification study should be tracked by the specialist per the OFCL User Documentation. Refer to the OFCL User Documentation for further instructions.
- D. Upon receipt, the licensing specialist will review the JFS 01290 and supporting documents, using the applicable areas of the appropriate *Appendix MM*, to ensure a complete packet is on hand. If the application is considered incomplete and/or incorrect, the specialist will return the original application and documentation, along with the *Appendix E-1* and the appropriate *Appendix MM*.

1. Following receipt of a JFS 1290 for Certification, all appendices should be directed to the administrator, with a copy to the board president (less attachments and issuance letters).
2. An application is incomplete if:
 - a. Any information required on the JFS 01290 Application for Certification of Agency Functions is missing (e.g., required signatures not on form).
 - b. Policies or other supporting documents requested on the JFS 01290 Application for Certification of Agency Functions are not included with the application.
3. An application is incorrect if:
 - a. Any information required on the JFS 01290 "*Application for Certification of Agency Functions*" is inaccurate (e.g., inaccurate date or information listed on form).
 - b. Policies or other supporting documents submitted are incongruent (e.g., ages or numbers of children referenced in the policies are not consistent with ages indicated on the JFS 01290 Application For Certification of Agency Functions).
 - c. Policies or other documents submitted are not compliant with the ORC or the OAC.
4. Upon receipt of the completed or revised JFS 01290 "*Application for Certification of Agency Functions*" and all supporting documents, plans or procedures the licensing specialist will review the documentation by using the *Appendix MM*. If the JFS 01290 "*Application for Certification of Agency Functions*" or supporting materials are still found to be incomplete or not in compliance with the requirements, the specialist will return the Appendix MM Agencies Policies, Plans & Procedures Development Tool to the applicant identifying the areas for correction along with the *Appendix E-1*. All applicable policies and supporting documentation must be in compliance. A copy of all application submissions, Appendix MMs and other submitted documentation shall be attached in OFCL in accordance with OFCL user documentation.
5. If the application is not returned within 180 days, and the applicants have not contacted the licensing specialist of the current intent or status, the specialist shall send the Appendix FF electronically. If no response is received the specialist shall

close the study. After a study is closed, the applicants can resubmit the application and a new study is created in OFCL.

6. If the application and documentation has been submitted 2 times and is still incorrect or incomplete, the applicants are encouraged to attend the New Agency Orientation Training, if they have not already attended, before they submit the application a third time. After the Application has been submitted 3 times (application and/or policies) to the licensing specialist and still incorrect or incomplete, the Application shall be reviewed for possible referral to the License Review Committee using the *Appendix II*. Refer to Chapter 12 *License Review Committee and Enforcements* for additional information regarding the License Review Committee. Direct any questions regarding this issue to the licensing supervisor. Once the application has been determined to be complete and correct, an Initial Certification review will commence. The specialist will record in OFCL the next step and indicate that the action is complete. Attach the complete and correct application and all submitted documentation to the study, to include any prior return of the application. An assessment of the agency and an on-site visit is to be initiated to determine 100% compliance with applicable rules.

IV. Onsite Activities

A. Record reviews (all agencies):

1. The Administrator, including training requirements if they will be acting as a child care staff.
2. All employees, including contracted employees, hired prior to licensure for technical assistance only.
3. All Child Care Staff for residential functions, hired prior to licensure for technical assistance only. Agencies must have adequate staff hired capable of being used for staff/child ratio and fully trained prior to being left alone with children (per 5101:2-5-09 and 5101:2-9-03) for all shifts within certified capacity.

NOTE: It is recommended that agencies wait to hire until 4-8 weeks prior to anticipated licensure, or as recommended by their licensing specialist.

4. Social Workers / Counselors who approve service plans and service plan reviews for residential functions, hired prior to licensure for technical assistance only

5. Assessors who conduct home studies for foster care and/or adoption functions, hired prior to licensure for technical assistance only
6. Professional Treatment Staff for specialized foster care, hired prior to licensure for technical assistance only
7. For Independent Living function only private agencies, licensing specialist are only reviewing the administrator record for qualifications and required policies.

*NOTE: Agencies applying for licensure with ODJFS must have a criminal background checks for all employees under ODJFS purview prior to hire. These checks must be dated no earlier than one year from the date of recommendation by the licensing specialist and be requested under the correct **Ohio Revised Code 2151.86**.*

- B. If an illegal operation applies for ODJFS certification, the applicant will be required to follow procedures per initial certification as any other applicant. The applicant will need to adjust the date of hire for all employees to reflect the application date with ODJFS.

NOTE: The application date shall be the date an application is received by ODJFS.

- C. If another state entity licenses the prospective agency/applicant, and there are children in care, the licensing specialist may review the child records for those children in placement for rule compliance with Ohio Administrative Code 5101:2-5-10. Technical assistance shall be offered to assure compliance with ODJFS rule requirements.
- D. For residential facilities, a physical inspection of each residential unit (cottage, home, etc.) to be certified by ODJFS must be conducted. A separate JFS 01340 *On-Site Inspection of Residential Facilities* shall be completed for each residential unit (see OAC rule 5101:2-1-01). To recommend Initial certification of a residential function all applicable items on each JFS 01340 *On-Site Inspection of Residential Facilities* must be answered “yes”. If the physical site has not met compliance within three inspections, the licensing specialist will discuss with the licensing supervisor and review the application for possible referral to the License Review Committee using the *Appendix II*. (Refer to FCLPM-Chapter 12: *License Review Committee and Enforcements*).
NOTE: The specialist may choose to conduct the on-site inspection of a facility at any point after the receipt of a complete application.
- E. The licensing specialist must conduct a reconciliation meeting for the JFS 3329 *Review of Agency Personnel Record*, JFS 1342 *Review of Child in Residential Care* and JFS 01340 *On-Site Inspection of Residential Facilities* as applicable. The reconciliation meeting is

defined as meeting with agency representatives to review and discuss the items listed on the personnel and onsite review forms and all technical assistance given regarding proposed personnel.

- F. Any areas of noncompliance noted via copies of the review forms and/or a *Summary of Findings of Noncompliance* must be corrected and in compliance with all applicable OAC rules prior to the recommendation for Initial certification.
- G. In order to recommend the agency for initial certification, the agency must be in full compliance with applicable OAC rules. The licensing specialist must inform the applicant that they may not operate until receipt of the certificate.

V. Application Withdrawn

- A. If the Initial application is withdrawn for any reason, the licensing specialist will address on the Appendix BB narrative the circumstances related to the withdrawal of the application.
- B. The Appendix FF and the withdrawal letter are uploaded as an attachment in OFCL.
- C. The study status is updated to reflect “application withdrawn”

VI. Compilation of Initial Study

- A. The licensing specialist will prepare a review summary (*Appendix BB*) detailing the outcome of the initial certification process. This summary shall include any information, which the specialist determines to be pertinent for a complete assessment of the agency. Remember that this information is public record, therefore, it must be presented in a factual, professional manner. Do not repeat the Summary of Findings of Noncompliance. Include a sentence in the Appendix BB that the specialist is recommending a two-year certificate for the agency or denial of initial certification, as applicable.

NOTE: Criminal record check print-outs are not to be uploaded and stored with the initial study in OFCL Filenet. Compliance should be determined pursuant to Chapter 8 of this manual.

- B. The following documents will be attached to the OFCL study (Refer to the OFCL Attachment Categories and Types document for instructions on attaching documents)

1. Application and Certification Documents:

- a. Draft Issuance letter (Appropriate *Appendix K* letter if PNA or PCPA, addressed to the president of the governing body, with a copy to the agency administrator). The draft letter should not be dated and attached to the OFCL study for the approval and administrative signature. (See VII of this Chapter regarding the certification effective date procedure).
 - b. Appendix BB
 - c. JFS 01290 Application For Certification Of Agency Functions;
 - d. Appendices
 - e. Returned Items – this includes application and all other documents submitted as the initial certification packet.
 - f. Miscellaneous
2. Approval Documents: The following material must be included, as applicable to the specific functions requested by the agency for licensure as listed on the current *Appendix MM*. All reports, approvals, and inspections must be clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.
- a. Building approval/Occupancy permit
 - b. JFS 01200 Fire Inspection; or State Fire Marshall Inspection Form
 - c. Well water report; (if applicable)
 - d. Food service license for facilities with a capacity of 16 or more children, if applicable
 - e. Returned Items
 - f. Miscellaneous
3. Review and Compliance Tools: The following material is automatically attached to the OFCL study as part of the compliance report as applicable:

- a. List of records reviewed
 - b. Records and corresponding compliance summaries
4. Other Required Documents:
- a. Articles of Incorporation (if articles were not already filed with the Secretary of State, a copy of the agency's proposed Articles of Incorporation and three letters of reference for each incorporator.)
 - b. Description of Programs
 - c. Farming Conforms to Regulations
 - d. Job Descriptions
 - e. Mission Statement
 - f. Resident & Family Handbook
 - g. Supervision Plan for Group Activities
 - h. Table of Organization
 - i. Miscellaneous
 - j. Returned Items
5. Policies:
- a. Policy Handbook, all policies
 - b. Specified Policies
 - c. Miscellaneous (Appendix MM)
 - d. Returned Items
6. Plans:
- a. Adoption Recruitment Plan

- b. Foster Caregiver Recruitment Plan
 - c. Medical Emergency Plan
 - d. Emergency/Disaster Evacuation Plan
 - e. Disaster Preparedness Plan
 - f. Contingency Plan for Care of Evacuees
 - g. Miscellaneous (Community Engagement Plan)
 - h. Returned Items
7. Other: All correspondence with the agency is to be included and clearly labeled:
- a. Email
 - b. Fax
 - c. Letter
 - d. Scan
 - e. Miscellaneous

VII. Initial Certification Recommendation

- A. Within 30 working days of the licensing specialist determination that the agency has met full compliance with its requested function(s), the following shall occur:
 - 1. The specialist will submit the Initial study via OFCL
 - 2. The licensing supervisor will review the Initial study for accuracy and take one or more of the following actions:
 - a. Return the Initial study to the specialist for correction and/or clarification
 - b. Agree with the specialist's recommendation and approve the study in OFCL

3. The Bureau Chief in the central office will review the study via OFCL and will either concur with the recommendation or return the study for additional information
4. After logging the packet, OFCL support staff will ensure the *Appendix K* letter and certificate are processed for signature, in accordance with prescribed procedures by the Office of Families and Children. Upon signature of the deputy director, FCL support staff will ensure the original *Appendix K* letter is provided to the board president, and copies are forwarded to the assigned specialist and others as listed on the *Appendix K* letter under “cc”.

Note: The initial certification date of the agency will be the date that the Bureau Chief signs off on approval of the study.

5. FCL support staff will also complete and process for SACWIS data entry, and ensure the original is forwarded to agency administrator with copies sent to the specialist, Title IV-E Foster Care Maintenance Unit and SACWIS.
- B. If the licensing specialist is recommending denial of the application, the following shall occur:
1. The specialist will submit the Initial study, minus the Appendix K letter, completed LRC *Appendix II form*, and a recommendation for denial of the Initial application to the licensing supervisor via OFCL.
 2. The supervisor will review the Initial study for accuracy and take one or more of the following actions:
 - a. Return the Initial study to the specialist for correction and/or clarification via OFCL
 - b. Agree with the specialist’s recommendation and refer the recommendation to the Licensing Review Committee (Refer to Chapter 8) via OFCL.

VIII. Follow-Up

- A. Between 60 and 90 working days following the effective date of an agency’s Initial certificate, the licensing specialist shall contact the agency’s administrator or designee to assess the need for and provide technical assistance. The specialist will open a visit study in OFCL.

- B. Once contact or a visit has been made, using the *Appendix BB* the licensing specialist shall document the contact and any technical assistance provided.
- C. Applicable review tools are used to document technical assistance. If the agency declines the follow up technical assistance visit, the licensing specialist should make a note of the date and time of contact, the name of the person contacted and a summary of the response. This information must be added to the narrative section of the Appendix BB in the next study associated with the agency.

I. Purpose of Recertification:

- A. The purpose of a recertification review is to assess the degree to which the agency has maintained compliance with departmental rules regulating the current functions, which the agency performs requiring certification pursuant to 5103.03 of the Ohio Revised Code (ORC). If an agency wishes to modify the current functions during the recertification process, a separate application for an amendment must be submitted and processed.

II. Notification to the Agency to Reapply:

- A. The licensing specialist shall notify an agency that has been issued a two-year certificate of the expiration date and that the agency must reapply. The notification shall be sent not less than 180 calendar days and not more than 210 calendar days prior to the expiration of the agency's certificate. Note: SACWIS generates email reminders 180 days prior to the expiration date.
- B. The licensing specialist shall send *Appendix M* via certified e-mail through Outlook or utilizing (JFSSECURE) in the subject line to the administrator or administrator designee of the agency. The specialist will attach a copy of the current *Appendix MM* specific to the agency certified functions with the *Appendix M* letter.
- C. Upon sending the correspondence to the agency, the licensing specialist will create a study in OFCL (refer to the current OFCL User Documentation). The specialist, per the OFCL User Documentation recommendation, should track the progress of a study in OFCL.

III. Application Process:

- A. The agency must submit the application not less than 120 days prior to the expiration of the existing certification. When the *JFS 01290 Application for Certification of Agency Functions* is received electronically then the email should be saved and uploaded in OFCL to verify timely receipt. A completed *JFS 01290 Application for Certification of Agency Functions* received less than 120 days prior to expiration of a certificate shall result in a citation of noncompliance presented at the exit conference. The late submission of the *JFS 01290 Application for Certification of Agency Functions* and or supporting documents may cause the certificate to lapse.
- B. In the event the agency does not apply timely, the licensing specialist shall advise the licensing supervisor. A supervisory consult will be attempted with the agency administrator and/or board president prior to issuing the "Notice of Pending Change in

the Status of the Current ODJFS Certification” letter (*Appendix Z*). The manager will hold a conference via phone, in person, or via certified email, no later than five days before the *Appendix Z-1* is released. The purpose of the conference is to document:

1. Last efforts to avoid the global notice and circumvent the lapse;
 2. Reiterate the need for the agency to act quickly and submit requested documents;
 3. Reiterate the time lines given by the specialist (drop dead dates);
 4. To inform the administrator and/or board president that failure to comply with JFS’ request(s) for information/action will result in the release of the *Appendix Z* to all PCSAs and a subsequent lapse in certification.
- C. When the *JFS 01290* application is received, the licensing specialist will review the original application and supporting documentation, within 10 working days, using the applicable *Appendix MM*, to ensure that it is complete and correct. The specialist will complete the sections of the appropriate *Appendix MM* for the certified functions of the agency as it pertains to the submitted *JFS 01290* application. The policy/plan section of the *Appendix MM* is completed for the items under section 5101: 2-5-08 (PCPA and PNA Governance and Administration) as these apply to the duties of the governing body. Pursuant to *Appendix M*, copies of specific documentation are required to be submitted with the *JFS 01290* application, such as the annual evaluations, budget approvals, policy reviews, and audits. The Articles of Incorporation can be answered as “on file” or “yes/no” if amendments are submitted or should have been submitted. Other items documented on the *Append MM* include requirements pursuant to OAC 5101:2-9-04(D); 5101:2-9-06(H)(I), 5101:2-9-08(A); 5101:2-9-20(E); 5101:2-9-30(A); and 5101:2-9-34(A) as they apply to the agency’s certified function(s). The agency is required to submit revised policies at recertification at the time their *JFS 01290* application is due. Therefore, the specialist will review all *revised* policies since the last submission, to ensure they meet rule compliance. No citations will be issued for revisions therefore technical assistance will be provided.
1. If the application is considered incomplete or incorrect, the specialist will scan and/or attach the application and all documentation to the OFCL case study and return the original application and documentation, along with the *Appendix E-2* and *Appendix MM* via certified email (JFSSECURE). The specialist will document all actions in OFCL. Please refer to the OFCL User Information for specific details.
 2. An application is incomplete if:
 - a. Any information required on the *JFS 01290 Application for Certification of Agency Functions* is missing (e.g., required signatures not on form).

recertification application and the amendment application must be processed separately and requires the submission of separate *JFS 01290* application and supporting documents for each submission. Please see Chapter 7: “Amendments and Closures” for specific information.

- G. The licensing specialist cannot proceed with a site visit to the agency to conduct a site inspection or review records without supervisory approval, until the agency has submitted a complete application, including the AICPA audits as required by ORC and OAC. Upon receipt the specialist must submit the audit(s) to the Office of Fiscal and Monitoring. **See section V. Paragraph A. of this Chapter for additional details.*
- H. The application and documents may be reviewed not more than 3 times. After the 3rd review or at the exit conference, any items on the final applicable *Appendix MM*, which are answered “No” shall be cited on the *Summary of Findings of Noncompliance* as additional findings. This includes policies and other required documentation that are incorrect or untimely.
- I. If the agency fails to re-apply by not submitting a *JFS 01290 Application for Certification of Agency Functions* prior to expiration, the licensing specialist shall notify the board president or chairperson in writing that the agency’s certificate has expired (Refer to *Appendix CC*). The specialist must refer to the procedures outlined in Chapter 7: “Amendments and Closures.”

IV. Notification to the Agency to Submit a List of All Records in Predetermined Universes:

- A. The licensing specialist shall notify an agency to send a list of all records in the specified universe using the *Appendix N*. The specialist may delete the sections of the *Append N* that are not applicable to the agency’s certified function(s). The notification shall be sent not less than 100 calendar days and not more than 120 calendar days prior to the expiration of the agency’s two-year certificate by certified email through Outlook or (JFSSECURE).
 - 1. The universe period for an agency issued a two-year certificate is a consecutive 8-month period beginning one year after the effective date of the current certificate.
- B. The agency must return the list of all records to the appropriate licensing specialist within 14 calendar days of receipt of the request. Prior to or after receiving the agency’s list of records, the specialist will contact (by phone or e-mail) the agency to schedule the entrance conference and on-site inspection times.
- C. If the licensing specialist receives the agency’s list of records within the 14 calendar days, the specialist will select a random sample of records using the process outlined in Section X Record Review in this chapter. The specialist will provide the agency with the

list of the specific records to be reviewed (see *Appendix NN*), at least 14 calendar days prior to the scheduled on-site inspection. The specialist shall send *Appendix NN* via certified email through Outlook or (JFSSECURE) to the administrator or administrator designee of the agency.

- D. Failure of an agency to submit the requested list of records, within the 14 calendar days, may deprive the agency of the prior knowledge of records to be reviewed and may cause a selection of the random sample of cases at the time of the on-site inspection. Failure to submit the records will not delay the on-site inspection.
- E. If the agency does not have any records to submit for any identified universe, the licensing specialist will document this information on the *Appendix BB Review Summary*.
 - 1. If the agency does not have any records to review, the specialist is still required to review recertification documents, such as board minutes, and to provide technical assistance. This can be a desk review or an on-site review.
 - 2. If the agency has residential facilities, onsite inspections must be conducted.

V. Entrance Conference:

- A. After the review of the application and supporting documentation, the licensing specialist may contact the agency to schedule the entrance conference but may not conduct the entrance until a complete application has been received, unless approved by the licensing supervisor. In addition, the appropriate AICPA (American Institute of Certified Public Accountants) financial audits required by Ohio Revised Code must be submitted and subsequently approved by the fiscal department.

Note: Refer to the Attachment at the end of this chapter of the FCLPM for specific information on review of the audits.

- B. If the licensing specialist chooses to begin a SACWIS review prior to the on site visit, the entrance conference shall be conducted by phone prior. If the specialist determines a SACWIS desk review is not necessary, the entrance conference shall be conducted on site prior to beginning the record review. (Applicable for agencies live in SACWIS)
- C. An additional entrance conference may be conducted onsite at the agency's office with the administrator/designee prior to the on-site review to discuss issues or noncompliance areas discovered during the SACWIS review.
- D. The purpose of the entrance conference is:
 - 1. To officially begin the on-site review

2. To clarify any information or material submitted with the *JFS 01290 Application for Certification of Agency Functions*.
3. To answer any questions or concerns of the administrator or designee and to explain the procedure for completion of the recertification review
4. To explain the compliance percentages determining the finding of noncompliance. All findings on the review forms are tabulated through the OFCL monitoring software and recorded on the respective compliance summaries. The noncompliant areas are reported on the Summary of Findings of Noncompliance for any element scoring less than 75%, with the exception of criminal background checks which must be at 100% compliance.
5. To receive and ensure that the requested sample of records has been provided by the administrator or designee.
6. To remind the agency any Corrective Action Plans will be reviewed to ensure implementation.
7. To inform the agency that a reconciliation conference will occur at the conclusion of the review, allowing the agency to locate in the record any documentation not found.

VI. Foster Home Visits:

- A. The purpose of the foster home visit is to verify the agency's assessment of the home. In addition, the visit will allow the foster caregiver to provide feedback regarding agency services.
- B. The licensing specialist must visit at least four foster homes during the agency's two-year certification period. If the sample of records is five or less, the specialist will select four homes to visit unless there are less than four homes. If there are over five records to review, then a specialist will visit the number of foster homes equal to half of the records reviewed, rounding up, to a maximum of ten foster homes. The licensing specialists are not required to re-visit homes previously visited, but may choose to do so. The visits may be completed anytime during the license span. If there are non-compliance noted during a foster home visit outside of a planned review, then a complaint shall be opened per Chapter 6 of this manual.

NOTE: Foster home visits are not required for Pre-Adoptive infant foster homes.

- C. The foster homes may be chosen from the list submitted for the review or from an ODJFS generated list of the agency's licensed homes (i.e. SACWIS). The licensing specialist may also select a home due to frequent cross referrals or other issues that

may bring the home into question. The specialist and agency will collaborate to schedule foster home visits. Efforts should be made to visit foster homes out of each branch office.

- D. If a foster home visit needs to be conducted and the home is located outside of the licensing specialist's region, a courtesy visit may be conducted by a specialist from another field office.
- E. On-site visits will be announced and should be no longer than one hour in duration. It is recommended the licensing specialist be accompanied by agency staff.
- F. The on-site inspection will consist of the following:
 - 1. Complete a new JFS 01348 *Safety Audit*, including licensing specialist's signature and date.
 - 2. Complete the on-site foster home visit tool.
 - 3. Compare the agency's completed JFS 01348 *Safety Audit* with the safety audit completed by the licensing specialist for discrepancies. If noncompliance is found, the specialist should discuss it with both the foster caregiver and agency representative in order to determine whether the agency was aware of the noncompliance existed at the time of the last completed safety audit.
- G. Any noncompliance on the JFS 01348 *Safety Audit* reviewed by the licensing specialist shall be documented on the Summary of Findings of Noncompliance. One or more of the following OAC rules shall be used to cite noncompliance:
 - 1. 5101:2-5-20(K)(10) for violations pertaining to the agency's failure to ensure that the assessor appropriately assessed the physical environment of the foster home during the initial certification. This citation must include the specific rule violation from the JFS 01348 *Safety Audit*.
 - 2. 5101:2-5-24(E)(7) for violations pertaining to the agency's failure to ensure that the assessor appropriately assessed the physical environment of the foster home during the recertification. This citation must include the specific rule violation from the JFS 01348 *Safety Audit*.
 - 3. 5101:2-5-30E(1) for violations pertaining to the agency's failure to ensure that the assessor appropriately assessed the physical environment of the foster home when a change of address occurred. This citation must include the specific rule violation from the JFS 01348 *Safety Audit*.

4. 5101:2-5-28(E) for violations pertaining to the agency's failure to conduct an investigation of alleged rule violation(s). This citation must include the specific rule violation from the JFS 01348 *Safety Audit*.
 5. If the noncompliance was not previously known to the agency, the licensing specialist shall advise the agency to conduct a rules violation investigation.
- H. Any alleged agency noncompliance discovered during the foster parent interviews should be investigated further by the licensing specialist. If it is determined noncompliance has occurred, it should be cited using the appropriate OAC rule reference.

VII. On-site Inspection as Applicable to the Agency's Certified Functions:

- A. For residential facilities, an on-site inspection of each living unit (See definition of living unit in OAC 5101:2-1-01) which is to be certified by ODJFS must be conducted. A separate e-form JFS 01340 *"On-Site Inspection of Residential Facilities"* is to be completed for each living unit. Refer to the OFCL User Manual for instructions on completing e-forms on and off line.

NOTE: *No onsite inspections are required for Independent Living function only agencies.*

- B. The agency shall be given the opportunity to correct areas of noncompliance that are not health and/or safety issues with the physical site prior to completing the on-site inspection of the living unit.

Exception: All items found out of compliance that present a safety risk will require immediate corrective measures to address the safety issues. In such instances, a citation for noncompliance will be issued and a CAP required.

- C. The licensing specialist shall request copies of all outstanding work orders prior to the commencement of an inspection. If there is a work order or other documentation, the repair must be scheduled to occur within 30 days of the agency's initial work order request date. If the agency cannot come into compliance within 30 days, the specialist will confer with the licensing supervisor for an extension. Any items that were permitted to be corrected shall be documented on the JFS 01340 "Onsite Inspection of Residential Facilities" form as corrected during the onsite review and should contain detailed information regarding the specific areas that were out of compliance and corrected. This documentation should be either addressed in the citation section of the specific question, or addressed on the note or the memo page.

- D. Any item on the JFS 01340 e-form answered “NO” will be cited on the Summary of Findings of Noncompliance and will require corrective action.

VIII. Interviews with Residents of Residential Facilities as Applicable to the Agency's Certified Functions:

- A. At least 2 residents in each living unit should be interviewed in person, if available, or via telephone.
 - 1. Residents to be interviewed are selected by the licensing specialist conducting the interviews and may or may not be the same residents whose case records are reviewed. Residents, who are age four and older, based on developmental functioning level, are to be interviewed.
 - 2. Interviews may be scheduled individually with each resident or in groups. Residents must be told at the beginning of the interview that we cannot guarantee confidentiality and we are required to report abuse and neglect allegations to the appropriate agency.
 - 3. The reviewer should explain the purpose of the interview and the role of the interviewer. In a Crisis Care Facility, if no children meet the criteria for an interview, the licensing specialist should observe a routine involving staff and children; such as mealtime, playtime, etc. and document a summary of the observations on the *Appendix BB*.
- B. Suggested topics of interviews with residents are contained in *Appendix F*. This e-form is to be used as a guide; it is recommended to include questions pertaining to the health, safety and welfare of children. The responses to each question are summarized in *Appendix BB* or a separate MS Word document, and attached to the study.
- C. If potential agency non-compliance is identified based upon the interviews, the licensing specialist will investigate the allegations via the case record review, additional interviews and/or discussions with agency management staff to determine if non-compliance exists. Any areas of noncompliance identified during the interviews must be discussed with agency staff prior to the issuance of a finding of noncompliance. The purpose of the discussion is to inform the agency of the information obtained during the interviews, including the possible noncompliance, and to offer an opportunity for the administrator or management staff to provide additional information or explanation.

IX. Interviews with Staff of Residential Facilities as Applicable to the Agency's Certified Functions:

- A. There is no established number or percentage of staff of residential facilities that must be interviewed. At least one staff from each living unit should be interviewed. The licensing specialist may choose to interview residential staff from each shift as well.
 - 1. Staff to be interviewed are selected by the specialist conducting the interviews and may or may not be the same staff whose personnel records are reviewed.
 - 2. Interviews may be scheduled individually, in groups, in person, or by telephone.
 - 3. Staff must be told that we cannot guarantee confidentiality and we must report abuse and neglect allegations to the appropriate agency.
 - 4. The reviewer should explain the purpose of the interview and the role of the interviewer.
- B. Suggested topics of interviews with staff are contained in *Appendix G*. This e-form is to be used as a guide; it is recommended to include questions pertaining to the health, safety and welfare of children. The responses to each question are summarized in *Appendix BB* or a separate MS Word document, and attached to the study.
- C. If potential agency non-compliance is identified based upon the interviews, the licensing specialist will investigate the allegations via the case record review, additional interviews and/or discussions with management. Any areas of noncompliance identified during the interviews must be discussed with agency staff prior to the issuance of a finding of noncompliance. The purpose of the discussion is to inform the agency of the information obtained during the interviews, including the possible noncompliance, and to offer an opportunity for the administrator or management staff to provide additional information or explanation.

X. Record Reviews:

- A. The licensing specialist shall review a sample size of 10% of the total number of agency records from the begin date of the certification period until the end date of the universe period in each category (rounding up). A minimum of 10 records and a maximum of 20 records for each category, shall apply. If the agency has fewer than 10 records in any applicable category, then all records must be reviewed. For large agencies, attempts should be made to ensure a fair sample of records across all offices.
- B. When a record falls within the specified universe period, all applicable elements on the review forms will be assessed for compliance.

NOTE: At the discretion of the licensing specialist and the licensing supervisor, additional records may need to be reviewed if significant non-compliance (systemic or specific) has occurred.

- C. It is expected that all available information will be in each record, in either SACWIS or the physical file. Retrieval of information during the time of the recertification review will be prohibited.
- D. The specific record categories are:
1. Adoptive Parents:
 - a. All adoptive homes approved or updated by a PCPA or PNA during the universe period.
 - b. The licensing specialist should attempt to have an equal number of new approvals and updates if the universe pool is large enough. Also, attempts should be made to have a sampling of the work of all assessors, including those in branch offices. If not, then the specialist will use what is available. Example: One agency has 25 records in the universe period, 12 approvals and 13 updates, five of each will be selected for the review. A second agency has 11 records in the universe, two approvals, and nine updates. The two approvals and eight updates would be selected for review.
 2. Child in Adoptive Placement:
 - a. All children in the permanent custody of the PCPA that were placed in an adoptive home during the universe period.
 3. Child in Residential Care:
 - a. All children in placement at a residential facility for at least one day during the universe period, including direct placements (See definition of direct placements in OAC 5101:2-1-01).
 - b. If an agency has more than one of any of the various types of facilities, a separate list is to be submitted for each individual facility. For purposes of the sampling process, the lists are to be combined for one sample (GH-CRC-RPF-CCCF-PNTWC). The licensing specialist should choose an equal number of records from each facility type and from each individual facility. That is, if the agency operates 5 group homes then a minimum of two (2) records from each group home should be selected. For a residential parenting facility, the review of cases will include the teenage parent and any of their children in placement in the facility.
 4. Child in a Foster Home:

- a. All children in the custody of the agency and all children accepted as a direct placement by the agency, who were in placement for at least one day in a foster home during the universe period.
5. Foster Homes:
- a. All foster homes (pre-adoptive, family, and specialized foster homes) as appropriate for the agency, and the effective date or expiration date of certification falls within the universe period. This also includes closed records and/or transferred homes whose initial certification or last recertification was conducted by the agency.
 - b. The licensing specialist should attempt to include in the sample an equal number of initial certifications and re-certifications, if the universe pool is large enough. (Example: An agency has 25 records in the universe period, 12 initial certifications and 13 re-certifications, 5 of each will be selected for the review.)
 - c. Attempts should be made to have a sampling of the work of all assessors.
6. Child in Independent Living Arrangements:
- a. Children in the custody of a PCPA who are at least sixteen years of age and living in an independent living arrangement, who were placed for at least one day during the universe period. *Consult with your supervisor for guidance in this situation.*
7. Personnel (two lists required: new hires and anniversary staff):
- a. Review of Agency Personnel (e-form 3329): Staff as specified below that were hired (including contract employees) or transferred internally during the universe period that are:
 - i. Child care workers for residential functions (See definition of child care staff in OAC 5101:2-1-01)
 - b. Review of Child Care Worker Training (e-form 1330): All child care workers whose annual anniversary date falls within the universe period. The anniversary date is the actual date of hire or transfer to a childcare worker position.
 - i. One sample is to be pulled from the new hires and one sample from the annual anniversary staff. If the universe pool is large enough, attempts should be made to have an equal sampling of each of the categories.
 - c. Review of Credentials/Assessor Qualifications (JFS 01680 Assessor Verification Form):

- i. Social Workers/Counselors who approve service plans and/or service plan reviews
 - ii. Assessors who conducted the initial home study assessments and/or re-certifications/updates to assure compliance with OAC 5101:2-1-01(B)(21) Children’s Services Definition of Terms.
 - iii. Treatment Team Leaders for specialized foster care
- d.** All criminal background checks will be reviewed separately, see Chapter 8 of this manual for additional details and procedure.
- E.** An over sample is an additional 1-3 records selected, if available, for each category that will be used in the event a selected record is excluded from the category criteria. If all of the records selected are reviewed, the over sample is not reviewed.
- F.** For each category of records, the results of the individual record reviews will be tabulated within OFCL on a specific compliance summary.
- G.** Review all cross-referral reports since the most recent additional visit and document on the *Appendix BB Review Summary* e-form.

XI. Reconciliation Conference:

- A.** The purpose of the reconciliation conference is to inform the agency of technical assistance, noncompliance, and to offer an opportunity for the administrator or administrator designee to locate information in a record that was reviewed and marked out of compliance, due to the licensing specialist being unable to locate the documentation. Retrieval of information from outside the specific record is prohibited. Citations of noncompliance shall be issued for the following: elements on the review forms, elements on the *Appendix MM*, interviews with staff and children, and OAC rule 5101:2-5-07(A)(2-5) violations. During the course of the review, if areas of noncompliance on other OAC and ORC requirements are discovered as part of the recertification review, outside of the routine elements previously identified, they may be cited as additional findings or presented as technical assistance. The specialist may consult with their licensing supervisor regarding additional findings.
- B.** In addition, during the reconciliation conference, the licensing specialist may discuss preliminary findings by reviewing the applicable compliance summaries if the compliance report is generated at the time of reconciliation.

- C. The licensing specialist shall review all agency corrective action plans (CAP) approved during the current certification period, including the CAP (if any) for the last certification review.
 - 1. CAPs which have not been implemented shall result in a citation for failure to implement the CAP [5101:2-5-07(A)(2)]. Any citation for failure to implement a corrective action plan shall list the specific rule(s) for which the agency failed to implement a CAP.
 - 2. Repeated non-compliance resulting from a reason other than the failure to implement the previously approved CAP would not result in a failure to implement the CAP citation.
 - D. At the discretion of the licensing specialist and with the agreement of the agency administrator or administrator designee, more than one reconciliation conference may be held during the on-site period for reconciliation purposes.
- XII. Exit Conference: Refer to Chapter 9, “Summary of Findings of Noncompliance, Appeals, and Corrective Action Plans”**
- XIII. Appeal Process: Refer to Chapter 9, “Summary of Findings of Noncompliance, Appeals, and Corrective Action Plans”**
- XIV. Review of Corrective Action Plan, If Applicable: Refer to Chapter 9, “Summary of Findings of Noncompliance, Appeals, and Corrective Actions Plans”**
- XV. Recertification Recommendation:**
- A. A recommendation for recertification may be for a two-year certificate or a temporary certificate. Additionally, a recommendation for denial of recertification may be made. If it is determined to recommend a temporary certificate (See Chapter 3) or to deny recertification, the licensing specialist and the licensing supervisor shall submit the recommendation and review materials to the License Review Committee (LRC). (See Chapter 12)
 - B. Recommendation for a two-year Certificate for all Certified Functions
 - 1. A two-year certificate shall be recommended for all certified functions provided the agency is operating at an acceptable level of compliance with applicable OAC and ORC laws.

2. If the licensing specialist is recommending a two-year certificate the following shall occur:
 - a. The specialist will submit via OFCL the recertification study no later than 15 working days prior to the date of expiration and attach the applicable Appendix K recommending approval to the licensing supervisor.
 - b. The licensing supervisor will review the recertification study no later than 5 working days of receipt and take one or more of the following actions:
 - i. Return the recertification study to the specialist for correction and/or clarification
 - ii. Forward recertification study to central office with a recommendation for approval.
 - c. The Bureau Chief will review the recertification study no later than 5 working days of receipt and take one or more of the following actions:
 - i. Return the recertification study to the supervisor or specialist for correction and/or clarification.
 - ii. Approve the recertification study and issue the certificate.
- C. Recommendation for Temporary Certificate: *See Chapter 3*
- D. Recommendation for Denial of Recertification: *See Chapter 12*
- E. Issuance Letter
 1. The purpose of the issuance letter is to inform the agency of the department's decision on the agency's request for recertification. The letter is sent with the certificate and includes any findings of non-compliance, certified functions, effective dates, capacity for residential facilities, age and gender of children served, and agency and facility addresses.
 2. The appropriate *Appendix K* Issuance Letter for a PCPA or PNA is to be addressed to the president or chairperson of the board with a copy of the letter to be sent to the administrator or administrator designee of the agency.
 - a. The president or chairperson of the board will receive the original of the issuance letter and a copy of the certificate.
 - b. The administrator or administrator designee of the agency will receive a copy of the issuance letter and the original certificate.
 3. The appropriate *Appendix K* Issuance Letter for a PCSA residential facility is to be addressed to the president or chairperson of the board for a CSB or the president of

the board of county commissioners for a CDJFS with a copy of the letter to be sent to the administrator or administrator designee of the agency.

- a. The president or chairperson of the board for a CSB or the president of the board of county commissioners for a CDJFS will receive the original of the issuance letter and a copy of the certificate.
- b. The administrator or administrator designee of the agency will receive a copy of the issuance letter and the original certificate.

F. ORC Chapter 119 Letter

1. The request for the issuance of an ORC Chapter 119 Letter (*Appendix O*) would be required only if an agency has filed a complete application for recertification within the time frame required by OAC 5101:2-5-04 and the department is unable to complete the recertification process prior to the expiration date of the certificate.
2. The licensing specialist shall consult with the licensing supervisor to determine whether the field office should generate an ORC Chapter 119 letter and a Recertification Status Report (both the letter and report are located within the Q Drive under the FCLPM Appendices folder).
3. The issuance of a 119 letter must receive the approval of the licensing supervisor prior to issuance. Submission of the 119 letter and the Recertification Status Report is via email to the supervisor and uploaded to the OFCL study by the Central Office.
4. Future additional visits shall be conducted as if the recertification study had been completed timely. This also includes additional recertification studies, however a recertification recommendation cannot be made until the pending recommendation is made and processed in OFCL.

XVI. Agency Decision to Not Apply for Recertification or Close Prior to or at Expiration

- A. If the agency decides to not to reapply for recertification or decides to close after the submission of the JFS 1290, the recertification study in OFCL must be closed.
 1. If the agency does not reapply:
 - a. Once the expiration date is met, the licensing specialist will select the action “passed expiration date, Study Close. The licensing supervisor will process and the recertification study will be closed.
 - b. Comment is entered on the case tab in OFCL indicated failure to submit the application.

- B. Refer to Chapter 7: “Amendments and Closures” for the agency closure process. As a follow up to a failure to reapply, the *Appendix Z-3* letter is sent to the board president upon the expiration of the current certificate.
- C. If the agency decides to close after they submitted the complete recertification application:
 - 1. The agency may decide to close immediately, prior to expiration or at expiration of the current certification period.
 - 2. If they close immediately or prior to expiration, the licensing specialist should request a written voluntary withdrawal with an effective date and the current certificate in effect.
 - a. The specialist would select the action of “Received Closure Request” and the study would be processed and closed.
 - b. Refer to Chapter 7 for agency closure process to determine if an on-site visit is necessary regarding a residential agency. Refer to Chapter 7 regarding currently licensed foster homes and or approved adoption studies, as applicable.
- D. If they close at expiration, refer to A and B above.

XVII. Compilation of Recertification Study:

- A. The licensing specialist will prepare a review summary (*Appendix BB*) detailing the outcome of the recertification process. This summary shall include any information, which the specialist determines to be pertinent for a complete assessment of the agency and its compliance, or failure to maintain compliance. Remember that this information is public record, therefore, it must be presented in a factual, professional manner in the event of an adjudication action. Do not repeat the Summary of Findings of Noncompliance. Include a sentence in the *Appendix BB* that the specialist is recommending a two year-certificate for the agency; a temporary certificate; revocation; or denial of recertification, as applicable. If the agency did not have any activity in a specific universe period for which the agency is certified, note this in the summary.
- B. The following documents will be attached to the OFCL study (Refer to the OFCL “Attachment Categories and Types” document for instructions on attaching documents)
 - 1. Application and Certification Documents:
 - a. Draft issuance letter. (*Appendix K-2, K-3, K-4*, as applicable).
 - b. *Appendix BB*

- c. Summary of Findings of Noncompliance Packet
 - d. Corrective Action Plan with Approval Letter
 - e. JFS 01290 Application for Certification of Agency Functions
 - f. ORC 119 License Continuation Letter/Recertification Status Report, if applicable
 - g. Accreditation, if applicable
 - h. Appendices
 - i. Returned Items – this includes application & all other documents submitted as the recertification packet. This category is also used for unapproved CAPS.
 - j. Miscellaneous
2. Approval Documents: The following material is to be attached, as applicable to the specific functions the agency is being recommended for licensure as listed on the current *Appendix MM*. All reports, approvals, and inspections must be clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.
- a. Building Approval/Occupancy Permit
 - b. JFS 01200 Fire Inspection
 - c. Well Water Report
 - d. Food Service License, if applicable (for facilities with a capacity of 16 or more children)
 - e. Waiver Recommendation – Results (Refer to waiver chapter regarding waiver eligibility criteria)
 - f. Waiver Request
 - g. Returned Items
 - h. Miscellaneous
3. Review and Compliance Tools: The following material is automatically attached to the OFCL study as part of the compliance report as applicable:
- a. List of records reviewed
 - b. Records and corresponding compliance summaries

- 4. Other Required Documents:**
 - a. Articles of Incorporation
 - b. Audits – AICPA, including approval/disapproval from fiscal
 - c. Board Minutes – Documentation of Board’s Required Activities
 - d. Description of Programs
 - e. Farming Conforms to Regulations
 - f. Job Descriptions
 - g. Mission Statement
 - h. Resident & Family Handbook
 - i. Supervision Plan for Group Activities
 - j. Table of Organization
 - k. Miscellaneous
 - l. Returned Items
- 5. Policies:**
 - a. Policy Handbook, all policies
 - b. Specified Policies
 - c. Miscellaneous
 - d. Returned Items
- 6. Plans:**
 - a. Adoption Recruitment Plan
 - b. Foster Caregiver Recruitment Plan
 - c. Medical Emergency Plan
 - d. Emergency/Disaster Evacuation Plan
 - e. Disaster Preparedness Plan
 - f. Contingency Plan for Care of Evacuees

4. Specifics on which certifying requirements are met by accreditation.
- E. The licensing specialist will review the request, and if necessary, contact the agency for additional information. Prior to the commencement of the on-site review, the specialist, after consulting with the licensing supervisor, will make a recommendation to approve or deny the request after considering whether the accrediting standard equals or exceeds OAC requirements and the extent of the agency's compliance with the standard.
1. The recommendation should include a rationale for the licensing specialist's recommendation. The request, recommendation, and supporting documentation will be forwarded to the licensing supervisor. The supervisor shall review, recommend approval/denial, and submit the recommendation to the Bureau Chief for final approval/denial.
- F. The licensing section may grant the request, if it does not violate any federal or state statute, nor allow the noncompliance of any other state regulation.
1. The granting of the request does not create a precedent nor does it guarantee subsequent approval.
 2. The denial of the request does not create appeal rights under Chapter 119 of the ORC.

I. Purpose of a Temporary Certificate

- A.** The purpose of placing an agency on a temporary certificate puts the agency on notice that continued noncompliance may result in further action taken by ODJFS Bureau of foster Care Licensing:
 - 1. Subsequent temporary certification
 - 2. Revocation of the agency's certification or denial of re-certification to perform the temporarily certified function(s).
- B.** The issuance of a temporary certificate applies to all or individual certified functions.
- C.** The duration of a temporary certificate is for up to 364 days.
- D.** A Corrective Action Plan (see Chapter 9 of this manual) review for an agency placed on a Temporary Certificate shall involve an onsite review between 60-90 days into the period of time of the Temporary Certificate.
 - 1. This review should be a teamed event which involves planning with the licensing supervisor.
 - 2. Specific to the compliance issues that required a Temporary Certificate.

Note: A temporary certificate prohibits placements made with a residential agency from being eligible for Title I-V E reimbursement. Further, a temporary certificate prohibits a foster care agency from receiving reimbursed administrative costs under IV-E.

II. Criteria for Determining if an Agency Qualifies For a Temporary Certificate

- A.** An agency shall be evaluated for a temporary certificate considering the following criteria:
 - 1. Volume of rule violations
 - a. Depth, scope and severity
 - 2. Repeated rule violation

- a. Depth, scope and severity
3. Federal law violations
 - a. FBI
 - b. MEPA
 - c. Title VI
4. State law violations
 - a. BCII
 - b. AICPA audits
5. Ohio Administrative Code Violations and Ohio Revised Code Violations
 - a. Missing, false or misleading information has been submitted
 - b. Refusal and / or failure to submit reports within required time frames
 - c. Refusal to admit licensing specialist to facility
 - d. Any act of omission or commission by an agency which results in the death, injury, illness, abuse, neglect or exploitation of a child in the care of the agency
 - e. Failure to implement or submit CAP(s)
 - f. Health and safety issues pertaining to children, parents, and or agency staff
- B. Once it has been determined an agency will be referred to LRC, refer to Chapter 12: *Licensing Review Committee and Enforcement* for the process of initiating a temporary certificate.

III. Notification to Placing Agencies when an ODJFS Certified Agency is Placed on a Temporary Certificate

- A. The Licensing Specialist will assure that written notice is sent to all agencies that have children in placement when a certified agency is placed on a temporary certificate.

IV. Notification to the Agency to Reapply

- A.** If the agency has been issued a temporary certificate, the licensing specialist is not required to send the notification letter. The *Appendix K-4* contains information on the reapplication requirements. The agency must access the JFS 01290 Application for Certification of Agency Functions online as instructed in *Appendix K-4*. Upon receiving the JFS 01290 and supporting documents the specialist will create a study in OFCL (refer to the current OFCL User Documentation).
- B.** The on-site review cannot be conducted until a complete JFS 01290 has been received, including the appropriate AICPA financial audits required by Ohio Revised Code, unless approved by the licensing supervisor. Refer to Attachment 5 for specific information on review of the audits.

V. Application Process: Refer to Chapter 2: Recertification Studies

VI. Notification to the Agency To Submit A List Of All Records In Predetermined Universes

- A.** The licensing specialist shall notify an agency to send a list of all records in the specified universe using the *Appendix N*. The specialist may delete the sections of the Appendix N that are not applicable to the agency's certified function(s). The notification shall be sent not less than 60 calendar days and not more than 90 calendar days prior to the expiration of the agency's two-year certificate by certified email through Outlook or by using (JFSSECURE).
 - 1.** The universe period for an agency issued a temporary certificate is one half of the temporary certification period. The universe period shall begin **60 days** after the date of the most recent recertification exit conference. If extenuating circumstances arise, preventing the start date of the universe period as stated above, the beginning date of the universe period should be decided upon with a consultation between the licensing specialist and the licensing supervisor.
- B.** The agency must return the list of all records to the appropriate licensing specialist within 14 calendar days of receipt of the request. Prior to or after receiving the agency's list of records, the specialist will contact (by phone or e-mail) the agency to schedule the entrance conference and on-site inspection times.
- C.** If the licensing specialist receives the agency's list of records within the 14 calendar days, the specialist will select a random sample of records using the process outlined in *Chapter 2: Recertification Studies*. The specialist will provide the agency with the list of the specific records to be reviewed (see *Appendix NN*), at least 14 calendar days prior to

the scheduled on-site inspection. The specialist shall send *Appendix NN* via certified email through Outlook or using (JFSSECURE) to the administrator or administrator designee of the agency.

- D.** Failure of an agency to submit the requested list of records, within the 14 calendar days, may deprive the agency of the prior knowledge of records to be reviewed and may cause a selection of the random sample of cases at the time of the on-site inspection. Failure to submit the records will not delay the on-site inspection.
- 1.** If the agency does not have any records to submit for any identified universe, the licensing specialist will document this information on the *Appendix BB Review Summary*.
 - 2.** If the agency does not have any records to review, the licensing specialist is still required to review recertification documents, such as board minutes, and to provide technical assistance. This can be a desk review or an on-site review.
 - 3.** If the agency has residential facilities, onsite inspections must be conducted.

VII. Removal from a Temporary Certificate Prior to Expiration

- A.** An agency may be removed from a Temporary Certificate prior to the expiration of the certificate by using the Licensing Review Committee (see Chapter 12 of this manual) recommendation.

VIII. For the following processes, refer to Chapter 2: Recertification Studies

- Entrance Conference
- Foster Home Visits
- On-Site Inspection as Applicable to Certified Functions
- Interviews with Residents
- Interviews with Staff
- Record Reviews
- Reconciliation Conference
- Exit Conference
- Appeal Process
- Review of Corrective Action Plans (refer to Chapter 9)
- Recertification Recommendation
- Agency Decision to Not Reapply for Recertification or Close
- Compilation of Recertification Study
- Acceptance of Accreditation in Lieu of Certification

I. Purpose of the PCSA Foster Home Review

- A. Public children services agencies (PCSAs) are mandated, by law (ORC 5153.16), to find or procure certified foster homes, thus they are not certified or licensed for this function. The purpose of the review of a PCSA is to assess the degree to which the agency has maintained compliance with applicable OAC rules regulating family, specialized, and pre-adoptive infant foster homes.

II. Notification for Foster Home Review

- A. Prior to notifying the PCSA of the pending record review, the licensing specialist should contact the agency to schedule the entrance conference date not less than 90 or not more than 120 days prior to the expiration of the last Appendix T letter. Once the entrance is scheduled, the specialist will create the study and update OFCL by entering the action "On-site scheduled" and adding the date and time in the comments. The action "SAVED" will save both the comments and the action. The specialist per the OFCL User Documentation recommendation should track the creation of a new study in OFCL.
- B. The hard copy established two-year period is used and SACWIS will be updated to reflect that period. To determine the two-year period, refer to the previous *Appendix T* for the PCSA to establish the beginning date. The end date is two years from that date. For example, the *Appendix T* reflects the prior entrance as 11/30/07 and the end of the two-year period is 11/29/09. This timeframe (11/30/xx to 11/29/xx) will always be their two-year period, as long as they continue to have a foster care program.
- C. The licensing specialist shall notify the PCSA, by sending the *Appendix Q* by email not less than 90 days and not more than 120 days prior to the expiration of the approval issuance letter (*Appendix T*) concerning the following:
 - 1. The entrance conference date, which must occur prior to the SACWIS review, which must be prior to the expiration date
 - 2. Submission of required policies, as applicable
 - 3. Request for the list of records; and
 - 4. The universe period - the universe period for the PCSA is twenty consecutive months beginning with the span date of the previous Appendix T letter.
- D. By mutual agreement between the licensing specialist and PCSA, the entrance

date may be rescheduled, but shall occur no later than the date of the current expiration.

- E. The agency must return the list of all records and revised policies to the licensing specialist within 14 calendar days of receipt of the notification letter *Appendix Q*. The PCSA should additionally submit a written statement on agency letterhead signed by the Director, assuring that all un-revised policies remain compliant with applicable OAC rules.
 - 1. The specialist may review the submitted list with the homes recorded in SACWIS. This comparison can be used to verify that the appropriate homes were submitted.
 - 2. Review the Certification Activity Report: Through the Provider Search, review the agency providers and their approval/certification history.
- F. If the licensing specialist receives an agency's list of records within the 14 calendar days, the specialist will select a sample of records. The sample should include an equal number of records from each home type of foster care (family, treatment, etc.), including over sample records, if available.

NOTE: An over sample is an additional 1-3 records selected, if available, for each category that will be used in the event a selected record is excluded by the universe criteria. If all of the records selected are reviewed, the over sample is not reviewed.

- G. The licensing specialist shall provide the agency with the identity of the specific records to be reviewed using the *Appendix NN* at least 2 weeks prior to the scheduled entrance.
- H. The PCSA's failure to submit the requested list of records within 14 calendar days may deprive the agency of the privilege of the two-week prior knowledge of records for review. In the event prior knowledge of the records in the universe period is not provided, a selection of the random sample of records shall occur at the time of the entrance. The PCSA's failure to submit the records will not delay the on-site review.

NOTE: At the discretion of the specialist and the licensing supervisor, additional records may need reviewed if significant non-compliance (systemic or specific) has occurred.

- I. The specialist must review all submitted policy revisions. Any item marked "no"

on the Append MM regarding policies should be reconciled with the agency staff during the reconciliation conference. Those policy revisions that were not submitted timely, or if an agency needs additional time to complete the revisions, may be permitted to be submitted under a separate policy revision study. This should be discussed with and approved by the supervisor.

III. Entrance Conference

- A.** If the licensing specialist chooses to begin a SACWIS review prior to the on site visit, the entrance conference shall be conducted by phone prior. If the specialist determines a SACWIS desk review is not necessary, the entrance conference shall be conducted on site prior to beginning the record review.
- B.** An additional entrance conference may be conducted onsite at the agency's office with the administrator/designee prior to the on-site review to discuss issues or noncompliance areas discovered during the SACWIS review.
- C.** The purpose of the entrance conference is:
 - 1.** To officially begin the review.
 - 2.** To clarify any issues with the policies submitted by the PCSA.
 - 3.** To answer any questions or concerns of the administrator and to explain the procedure for the completion of the foster home review.
 - 4.** To explain the compliance percentages determining the finding of noncompliance.
 - 5.** To coordinate the required foster home visits.

IV. Record Reviews

- A.** The licensing specialist shall review a sample size of 10% of the total number of agency records in the certification period (rounding up), with a maximum of 20 records that fall within the specified universe period. If the agency has fewer than 10 records in the universe, then all records must be reviewed. For large agencies, attempts should be made to ensure a fair sample of records across all branch offices.

- B. When a record falls within the specified universe period, all applicable elements on the review forms will be assessed for compliance.
 - C. It is expected that all available information will be in each record, in either SACWIS or the physical file. Retrieval of information during the time of the review will be prohibited.
 - D. The specific record category is all foster homes, including closed records, whose effective date for initial certification or expiration date for recertification falls within the universe period. The home study must have been completed and approved by the agency for all initial certifications and re-certifications in each respective category. This also includes records where the home study or update was completed by the agency, and the foster home subsequently transferred to another agency.
 - 1. The licensing specialist should attempt to have an equal number of initial certifications and re-certifications in the universe period, if the universe pool is large enough.
 - 2. Attempts should also be made to have a sampling of the work of all assessors.
- NOTE:** At the discretion of the specialist and the licensing supervisor, additional records may need to be reviewed if significant non-compliance (systemic or specific) has occurred.
- E. If the agency does not have any records to submit for the universe, the licensing specialist will document this information on the *Appendix BB*.
 - F. At the time of the onsite visit, the licensing specialist shall request the JFS01680 Assessor Verification Forms for all Assessors who completed the home studies and updates selected as part of the review.
 - 1. The purpose of this is to determine that the Assessor has and maintains the qualifications as defined in OAC 5101:2-1-01 (B) (21) Children Services Definition of Terms.
 - 2. If it is determined that an Assessor has failed to maintain the required qualifications, the licensing specialist shall cite the agency with a NO response to question 43 or 44 (as applicable) on the E form for that specific record.

- V. Foster Home Visits: Refer to Chapter 2, “Recertification Studies”**
- VI. Reconciliation Conference: Refer to Chapter 2, “Recertification Studies”**
- VII. Exit Conference: Refer to Chapter 9, “Findings of Non-compliance, Appeals, and Corrective Action”**
- VIII. Appeal Process: Refer to Chapter 9, “Findings of Non-compliance, Appeals, and Corrective Action”**
- IX. Review Of Corrective Action Plan: Refer to Chapter 9, “Findings of Non-compliance, Appeals, and Corrective Action”**
- X. Compilation of PCSA Study**
 - A.** The licensing specialist will prepare a review summary (*Appendix BB*) detailing the outcome of the foster care review process. This summary shall include any information, which the specialist determines to be pertinent for a complete assessment of the agency and its compliance, or failure to maintain compliance. Remember that this information is public record, therefore, it must be presented in a factual, professional manner in the event of an adjudication action. Do not repeat the Summary of Findings of Noncompliance. If the PCSA did not have any activity in a specific universe period the specialist should note this in the summary.
 - B.** The following documents will be attached to the OFCL study (Refer to the OFCL Attachment Categories and Types Document for instructions on attaching documents)
 - 1. Application and Certification Documents:**
 - a.** Draft issuance letter (Appendix T-1, T-2, T-3, or T-4)
 - b.** Appendix BB
 - c.** Summary of Findings of Noncompliance Packet
 - d.** Corrective Action Plan with Approval Letter
 - e.** Appendices

- f. Returned Items – this includes application & all other documents submitted as the recertification packet. This category is also used for unapproved CAPS
 - g. Miscellaneous
- 2. Approval Documents: All reports, approvals, and inspections must be clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.
 - a. Foster home safety audits can be attached here
- 3. Review and Compliance Tools: The following material is automatically attached to the OFCL study as part of the compliance report as applicable:
 - a. List of records reviewed
 - b. Records and corresponding compliance summaries
- 4. Policies:
 - a. Policy Handbook, all policies
 - b. Specified Policies
 - c. Miscellaneous
 - d. Returned Items
- 5. Other: All correspondence with the agency is to be included. All correspondence shall clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.
 - a. Email
 - b. Fax
 - c. Letter
 - d. Scan

- e. Miscellaneous

XI. Foster Home Review Study Submission

- A. Upon completion of the foster home review study, the licensing specialist shall complete the *Appendix T* as a draft, reflecting the outcome of the review as acceptable or unacceptable. Factors to consider when determining acceptable or unacceptable would be safety issues and repeat non-compliance, volume of citations, failure to implement the corrective action, etc. in consultation with the licensing supervisor. The time-period will be the new two-year period (using our example on page 1, the new period is 11/30/09-11/29/11).
- B. The licensing specialist will submit the foster home review study via OFCL within 90 calendar days from the entrance.
- C. The licensing supervisor will review the foster home review study within 5 calendar days and take one or more of the following actions:
 - 1. Return the study to the licensing specialist for correction and/or clarification
 - 2. Forward the foster home review study to central office via OFCL.
- D. The final *Appendix T* will be issued from central office within 5 working days with a copy attached to the OFCL study.

XII. Addition or Deletion of a Foster Home Function

- A. If the agency wishes to delete a foster home function:
 - 1. Upon notification the PCSA wishes to delete a type of foster home function, the licensing specialist should discuss the transfer of the agency's currently certified homes to other agencies, as appropriate.
 - 2. Advise the agency to submit in writing on agency letterhead a statement indicating the decision as well as an effective date and signed by the Director.
 - 3. Upon receipt of the letter, the licensing specialist will follow up to ensure the timely transfer of the foster homes to other agencies. A study is created in OFCL as a closure study if they are terminating all foster home approvals and as a PCSA review if they are adding or deleting an approved function.

4. An *Appendix T-4* is prepared for processing.
 5. Supporting documentation is attached to the study and upon completion, the study is forwarded via OFCL.
- B.** If the agency wishes to add a foster home function:
1. Upon notification the PCSA wishes to add a foster home function type, the *Appendix MM* is sent to the agency to assist them with their policies.
 2. Upon receipt of the policies, a study is created in OFCL as a PCSA review. The licensing specialist will review the policies and other documentation within 30 working days of the date of receipt.
 3. Upon approval of the policies, an *Appendix T* is prepared for processing.
 4. Supporting documentation is attached to the study and upon completion, the study is forwarded via OFCL per 5 above.

I. Purpose of Additional Visits

- A. The purpose of an additional visit is to assess an agency's compliance with OAC rules and to help the agency come into compliance with rules.

EXCEPTION: The licensing specialist does not need to conduct additional visits to PNA agencies that are certified to perform the independent living function only, as there aren't records required to be reviewed by the specialist. However, the licensing specialist shall contact the agency during this timeframe to determine the need for technical assistance.

- B. If the agency is in a 119 status, the additional visit should be conducted as if the certificate was issued timely.
- C. If the agency is in the process of an enforcement action, such as revocation, the additional visit occurs as if the certificate has been issued, unless the Enforcement Coordinator indicates otherwise. Two licensing specialists must conduct the visit.

II. Guidelines for the Required Additional Visit

- A. When an agency has been certified or recertified, the licensing specialist shall conduct the additional visit within the first six to twelve months of certification/recertification. The universe period is from the effective date of the certificate up to the date of the visit, not to exceed twelve months following the effective date of the certificate. This visit should be unannounced; *however, the specialist may choose to provide advance notice to an agency that performs only the foster care and/or adoption function.* The specialist is to use the access to administrator procedures to contact staff in the event there are no staff present at the agency at the time of the unannounced visit. The specialist should contact their supervisor if they utilize an alternate worksite while awaiting agency staff or further clarification.
- B. Pursuant to the OFCL User Documentation, a study is created in OFCL and must be tracked by the licensing specialist per the OFCL User Documentation recommendation.
- C. Upon arrival, the licensing specialist is to identify him/herself to the highest-ranking staff person present and inform that the person that an unannounced inspection of the agency is to occur, the manner in which it is to be conducted, and any assistance, which will be needed in retrieving records or conducting a site visit.

- D.** If the licensing specialist is denied access or entrance for the purpose of the additional visits, state or read to the individual denying access or entrance, for the record, Ohio Administrative Code Rule 5101:2-5-07(A)(5) as follows:
1. “According to the Ohio Administrative Code rule 5101:2-5-07(A)(5), the Ohio Department of Job and Family Services may deny certification or revoke an agency’s certification for refusing to admit onto its premises any person performing duties required by chapter 5101:2-5 of the Administrative Code relevant to the intended or authorized functions of the agency, state, or federal law or regulations or municipal ordinance.”
 2. “Do you understand that we have the authority to conduct this visit?” If the answer is yes, continue with the visit. If the answer is no, ask the question below in #3.
 3. “Are you now denying us access to your agency and refusing to allow us to conduct this visit?”
- E.** If not allowed to conduct the visit, leave the premises. Notify a supervisor as soon as possible, and within five working days of being denied access to conduct an inspection of the agency, the licensing specialist will submit a brief written summary of the attempted visit to the licensing supervisor.
- F.** If the licensing specialist is allowed to conduct the additional visit, at a minimum the visit must include:
1. An on-site physical inspection of at least three residential living units, as applicable. It is recommended at least one of each function (ie: group home, children’s residential center, Residential parenting facility, crisis care facility). The On-Site Inspection of Residential Facilities tool must be completed for this inspection.

At the discretion of the licensing specialist and the licensing supervisor, additional facilities may need to be inspected if significant non-compliance (systematic or specific) has occurred.

- a. The licensing specialist shall request copies of all outstanding work orders prior to the commencement of an inspection.

- b. The agency shall be given the opportunity to correct areas of noncompliance with the physical site prior to completing the on-site inspection of the living unit. For areas corrected while the licensing specialist is on-site, any repeat non-compliance from the most recent recertification visit in these same areas shall be cited during the additional visit.

Exception: All items found out of compliance that present a safety risk will require immediate corrective measures to address the safety issues. In such instances, a citation for noncompliance will be issued and a CAP required.

- c. If there is a work order or other documentation, the repair must be scheduled to occur within 30 days of the agency's initial work order request date. If the agency cannot come into compliance within 30 days, the licensing specialist will confer with the licensing supervisor for an extension. Any items that were permitted to be corrected shall be documented on the JFS 01340 "Onsite Inspection of Residential Facilities" form as corrected during the onsite review and should contain detailed information regarding the specific areas that were out of compliance and corrected. This documentation should be either addressed in the citation section of the specific question or addressed on the note or the memo page.
2. A review of a minimum of 5 records from each category or half of the number of records that were pulled in each category from the last recertification visit that fall within the universe period, whichever is greater.
 3. Review all cross-referral reports since the recertification and document on the Review Summary e-form.
 4. If the agency does not have any records for the universe period for any specific record category, the licensing specialist will document the information on the *Append BB Review Summary*. Site inspections will still be conducted for residential facilities.
 5. The licensing specialist may conduct foster home visits during the additional visit. The completed foster home on-site form must be included with the additional visit report. Refer to Chapter 2, Section VI, Foster Home Visits.

6. Any item with less than 100% compliance will be cited on the Summary of Findings of Noncompliance and will require corrective action.

III. **Reconciliation Conference**

- A. The purpose of the reconciliation conference is to inform the agency of noncompliance, and to offer an opportunity for the agency to locate information in a record which was marked out of compliance. Retrieval of information from outside the specific record is permitted during the additional visits. However, documentation cannot be created. The reconciliation conference may also serve as clarification to issues that may not be out of compliance.
- B. At the discretion of the licensing specialist and with the agreement of the agency administrator or designee, more than one conference may be held during the on-site period for reconciliation purposes.
- C. During the additional visit, the licensing specialist shall review any corrective action plan (CAP) approved as a result of the recertification review and any subsequent investigative reviews. CAPs which have not been implemented shall result in a citation for failure to implement the CAP (OAC rule 5101:2-5-07(A)(2). Any citation for failure to implement a CAP shall list the specific rule(s) for which the agency failed to implement a CAP.

IV. **Exit Conference:** *Refer to Chapter 9, Exit Conference, Findings of Noncompliance, Corrective Action Plans and Appeals.*

V. **Review of Corrective Action Plan, If Applicable:** *Refer to Chapter 9, Exit Conference, Findings of Noncompliance, Corrective Action Plans and Appeals.*

VI. **Appeal Process:** *Refer to Chapter 9, Exit Conference, Findings of Noncompliance, Corrective Action Plans and Appeals.*

VII. **Compilation of Additional Visit Study**

- A. The licensing specialist will create a visit study in OFCL either prior to the actual visit or prior to uploading the offline review forms. The specialist will prepare an *Appendix BB Review Summary* detailing the outcome of the additional visit. This summary shall include any information in the narrative, which the specialist determines to be pertinent for a complete assessment of the agency and its compliance, or failure to maintain compliance. Remember that this information is public record therefore it must be presented in a factual, professional manner in the event of an adjudication action. Do not repeat the Summary of Findings of

Noncompliance. If the agency did not have any activity in a specific record category for which the agency is certified, note this in the summary.

- B.** The following documents will be attached to the study and submitted via OFCL within 20 working days of the final approval of the CAP or issuance of the Appendix WW. Refer to the OFCL Attachment Categories and Types Document for instructions on attaching documents.

1. Application and Certification Documents

- a. Appendix BB
- b. Summary of Findings of Noncompliance Packet
- c. Corrective Action Plan with Approval Letter
- d. Returned Items – this category is also used for unapproved CAPS
- e. Appendices – as applicable

- 2. Review and Compliance Tools:** The following material is automatically attached to the OFCL study as part of the compliance report as applicable:

- a. List of records reviewed
- b. Records and corresponding compliance summaries

- 3. Other:** All correspondence with the agency is to be included. All correspondence shall be clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.

- a. Email
- b. Fax
- c. Letter
- d. Scan
- e. Miscellaneous

VIII. Supervisory Review

- A.** The licensing supervisor will review the additional visit study within 30 working days of receipt and take one of the following actions:
- 1.** Return the study to the licensing specialist for correction and/or clarification;
or
 - 2.** Approve and forward the study for completion in OFCL

I. Purpose

- A. The purpose of a complaint investigation is to investigate specific alleged rules violations by agencies brought to the attention of ODJFS Licensing Section pertinent to the current functions, which the agency performs requiring certification pursuant to 5103.03 of the Ohio Revised Code (ORC).
1. An alleged rule violation shall be defined as alleged noncompliance with Chapter 5103 of the Ohio Revised Code (ORC); Chapters 5101:2-5, 5101:2-7, 5101:2-9, 5101:2-33; 5101:2-39, 5101:2-42, 5101:2-44, 5101:2-47, 5101:2-48, 5101:2-52 and/or rule 5101:2-1-01 of the Ohio Administrative Code (OAC) or of any other Administrative Code or Ohio Revised Code Chapter relative to the agency's certified function(s).
 2. Alleged rule violations fall into one or more of the following categories:
 - a. Alleged rule noncompliance regarding an agency's certified functions.
 - b. Alleged rule noncompliance regarding a PCSA foster home function.
 - c. Alleged rule noncompliance regarding an individual foster home.
 - d. Alleged operation of an ODJFS licensed agency performing an uncertified function(s).
 - e. Alleged operation of an organization or person, not licensed by ODJFS, performing a function(s) which requires certification. (See Chapter 11: *Licensed by Another Entity, Illegal Operation*).

II. Receipt of Complaint

- A. Complaints may be received from any source, internal or external, via telephone, written correspondence, or email; or the licensing specialist may initiate a complaint, if determined necessary, at any time. For any situations where the specialist may be unsure whether or not the information shared rises to the level of a complaint, the specialist is to consult with the licensing supervisor for input.
- B. Any complaint alleging child abuse/neglect (including allegations made by a child or staff person during an on-site inspection), shall be immediately referred to the appropriate PCSA for investigation. Agency certification personnel are NOT to investigate child abuse/neglect, only alleged licensing rule violations.
- C. Complaints relative to Section I, Paragraph A(2)(a), (b), and (d), are to be documented in

OFCL by the licensing specialist on the Complaint and Disposition Report form.

- D. Complaints relative to Section I, Paragraph A (2)(c) above shall be reviewed and referred to the agency which recommended the foster home for certification. The recommending agency shall review the allegation information to determine if there is a need to conduct an internal rules violation investigation pursuant to OAC rule 5101:2-5-28(E), as required. A complaint study may be opened by licensing staff, in consultation with the supervisor, depending on the circumstances surrounding the alleged rules violation. Refer to section XI, letter (D) of this chapter for additional procedures.

III. Complaint Investigation Timeframes

- A. The licensing specialist shall commence an investigation within 3 working days (not including the date of receipt) of gaining knowledge of the allegations.
- B. If the licensing specialist receives a complaint from an ODJFS source such as the Central Office or licensing supervisor, the 'date of receipt' and 'date of initiation' will be reflected as the same date on the *Complaint and Disposition Report* form.
- C. The process of forwarding the complaint for investigation will be considered the 'initiation'. Upon gaining knowledge (e.g. receipt of email) of the complaint, the licensing specialist will then commence the investigation within 3 working days. If the specialist receives the complaint directly from the complainant, the date of initiation will be reflected as the actual date the specialist commences the investigation, which shall be within 3 working days of receipt of the complaint, (not including the date of receipt).
- D. Commencing an investigation is defined as any one of the following activities based on the severity of the complaint in the judgment of the licensing specialist and if needed, after consultation with the licensing supervisor:
 - 1. A phone call, email, letter, information obtained via SACWIS or an on-site visit to the agency.
 - 2. A phone call, email, letter, information obtained via SACWIS or meeting with collateral contacts
- E. If the complainant wishes to remain anonymous, the licensing specialist should advise him/her that the department cannot assure his/her identity will remain confidential. Licensing records are public records, and such records pertaining to a complaint investigation may be subpoenaed in the course of a legal proceeding.

- F. A complaint investigation must be completed within 60 working days of commencement unless delayed due to a PCSA investigation, a police investigation, or other extenuating circumstances with supervisory approval. The date of the exit conference or follow up via the *Appendix WW* letter, will be considered the date of completion.

IV. Complaint Investigation Procedures Regarding Agencies Under Current Certification

- A. When a complaint is received, the administrator of the agency is to be contacted to explain the nature of the complaint and the need for an investigation, unless it is determined that an unannounced investigation is to be conducted by the licensing specialist or additional information has been requested from other parties. Details of the complaint are not to be discussed with the agency staff at this time. The purpose of the contact with the agency is to ensure the appropriate staff and records, as applicable, are available when the onsite review is conducted. It is permissible to provide the name of the records and/or staff involved in the complaint to ensure accessibility.
- B. The investigation of alleged licensing rule violations may be delayed due to a PCSA investigation of abuse/neglect, or a police investigation.
 - 1. Licensing staff should review SACWIS information on the report to see if third party is being conducted and to coordinate review with the PCSA, if possible.
 - 2. The PCSA is required by OAC 5101:2-36-04(L)(4) to attempt to coordinate the interview of the ACV. However, the licensing specialist can make the attempt to coordinate the interview as well.
 - 3. Licensing specialist should set ground rules for coordinated investigations with the PCSA or law enforcement prior to questioning parties. All rule related-questions should follow the criminal or abuse/neglect line of questioning, if preferred.
- C. The licensing specialist shall consult with the licensing supervisor to determine the necessity of an onsite investigation. Licensing specialists may review paper documentation or SACWIS information, at any time as a tool but not the sole source of information, in conducting the investigation to determine agency compliance with OAC. On-site record and/or facility reviews may be required to assess agency compliance with health and safety issues. Licensing specialists are required to conduct interviews, via telephone or in person with the child (ren) involved, witnesses, staff members and any collateral sources unless directed otherwise by the licensing supervisor. Licensing specialist shall attempt to coordinate interviews with the custodial agency or other entities such as law enforcement, to minimize potential trauma to the child.

Note: Do not print and attach the documentation used in SACWIS. You must summarize the SACWIS information you have reviewed.

- D. An on-site complaint investigation may be completed in conjunction with another required visit. A complaint study would be created in OFCL in addition to the other required visit, thus two studies for one on-site visit are created.
- E. Upon arrival at the agency, the licensing specialist will identify himself/herself to the administrator or highest ranking staff member present in the agency for the purpose of informing the agency that an investigation is to occur and the manner in which it is to be conducted.
- F. If staff is denied access, entrance, or the opportunity to investigate, state or read to the individual denying access or entrance, for the record, the following:
 - 1. According to Section 5101.37 of the Ohio Revised Code, the Ohio Department of Job and Family Services is given the authority to "...make any investigations that are necessary in the performance of their duties..."
 - 2. According to Ohio Administrative Code rule 5101:2-5-07(A) (5), any agency's certificate to perform specific functions may be revoked for refusing to admit onto its premises any person performing duties required by Chapter 5101:2-5 of the Administrative Code or other applicable Chapters of the Administrative Code relevant to the intended or authorized functions of the agency, state or federal law or regulations or municipal ordinance.
 - 3. "Do you understand that we have the authority to conduct this investigation?"
 - 4. "Are you now denying us access to your agency and refusing to allow us to conduct this investigation?"
- G. If not allowed or unable to conduct the investigation, leave the premises. As soon as possible or within 1 working day of being denied access or the inability to conduct an investigation, the licensing specialist will inform their supervisor of the situation and will submit the Complaint and Disposition Report with an account of the attempted investigation.
- H. If staff is allowed to conduct the investigation, proceed.
- I. A complaint investigation shall include one or more of the following activities as applicable:

1. A physical inspection of the living unit related to the complaint, as applicable. An On-Site Inspection of Residential Facilities e-form (form 1340) must be completed for the elements related to the nature of the complaint. Any area found out of compliance regarding the specific complaint alleged rules violated will be marked "No" on the On-Site Inspection of Residential Facilities form or detailed as an Additional Finding if not addressed on the e-form and cited on the *Summary of Findings of Noncompliance* and will require corrective action. Technical assistance may be provided on elements unrelated to the complaint
 2. A review of records or any other related information to the nature of the complaint, as applicable. The applicable e-form must be completed, using only the elements related to the nature of the alleged rule violation. All unrelated elements shall be marked N/A. If there is not an applicable review tool to complete as related to the alleged rule violation, then the additional findings e-form should be completed. Technical assistance may be provided on elements unrelated to the alleged rule violation.
 3. Interviews with staff or residents as deemed pertinent to the complaint. The interviews may be face to face or via telephone. The responses to each question are summarized in the Complaint and Disposition form or the *Appendix F* and *Appendix G*, as applicable to the complaint. Responses to questions should be clearly identified by the individual's record number in working notes, should comments be needed for enforcement. Care must be taken to document what questions were asked and what specific answers were given.
- J. If agency non-compliance is identified based upon the interviews, the licensing specialist will corroborate the allegations via the case record review, additional interviews and/or discussing with agency management staff. If interviews conducted with staff and/or residents revealed rule noncompliance, it will be cited on the *Summary of Findings of Noncompliance* and will require corrective action.
- K. When policies are reviewed related to the alleged rule violation, the *Appendix MM* must be completed using only the sections or questions related to the nature of the alleged rule violation. If any policies were reviewed using the *Appendix MM*, any element *specific to the allegation* marked "NO" will be cited on the *Summary of Findings of Noncompliance* and will require corrective action. Other items found as non-compliant will be marked as technical assistance, unless determined to be otherwise after consultation with the licensing supervisor.

NOTE: If noncompliance is noted with rules not directly related to the nature of the alleged rule violation, the specialist shall consult with the supervisor as to appropriate action to be taken.

V. Reconciliation

- A. If areas of noncompliance were documented during the investigation, the licensing specialist will conduct a reconciliation conference with the administrator or designee.
- B. The reconciliation conference is an opportunity for the administrator or administrator designee to locate information in a record which was reviewed and marked out of compliance. Construction of non-existent documentation will not be permitted; however, retrieval of information is permitted if it occurs prior to the conclusion of the reconciliation conference. Any item *specific to the allegation* on a record review form answered “NO” will be cited on the *Summary of Findings of Noncompliance* and will require corrective action. Other items found as non-compliant will be marked as technical assistance, unless determined to be otherwise after consultation with the licensing supervisor.
- C. Any areas of noncompliance identified during the interviews must be discussed with agency staff prior to the issuance of a finding of noncompliance. The purpose of the discussion is to inform the agency of the information obtained during the interviews, including the possible noncompliance, and to offer an opportunity for the administrator or management staff to provide additional information or explanation.

VI. Exit Conference: Refer to Chapter 9, “Findings of Non-compliance, Appeals, and Corrective Action”

VII. Appeal Process: Refer to Chapter 9, “Findings of Non-compliance, Appeals, and Corrective Action”

VIII. Review of Corrective Action Plan, if Applicable: Refer to Chapter 9, “Findings of Non-Compliance, Appeals and Corrective Action”

IX. Compilation of Complaint Investigation:

- A. The following documents will be attached to the OFCL study (Refer to the OFCL Attachment Categories and Types document for instructions on attaching documents):
 - 1. Application and Certification Documents:
 - a. ODJFS Complaint and Disposition Report
 - b. Summary of Findings of Noncompliance Packet

- c. Corrective Action Plan with Approval Letter
 - d. Returned Items – this category is also used for unapproved CAPs
 - e. Miscellaneous
2. Review and Compliance Tools: The following material is automatically attached to the OFCL study as part of the compliance report as applicable:
- a. List of Records Reviewed
 - b. Records and corresponding compliance summaries
3. Policies: as applicable
- a. Policy Handbook, all policies
 - b. Specified Policies
 - c. Miscellaneous (Appendix MM can be attached here)
 - d. Returned Items
4. Other: All correspondence with the agency is to be included. All correspondence shall be clearly labeled in OFCL and attached to the OFCL report. Refer to the OFCL User Documentation for instructions on attaching documents.
- a. Email
 - b. Fax
 - c. Letter
 - d. Scan
 - e. Miscellaneous (The JFS 1301, if applicable pertaining to RAPBACK *see paragraph XIII below, can be attached here)

X. Constituent Follow up:

- A. In the event that the constituent or the person making the complaint inquires regarding the resolution or findings of the complaint, the licensing specialist can verbally share if

there are findings. For all other information requests, the specialist shall refer the person to the public records request procedures per Chapter 14: *Communication and Record Retention*.

XI. Cross Referrals

- A.** OAC rule 5101:2-36-12 (D) requires the PCSA to contact ODJFS licensing authorities no later than the next working day for the date the referral was screened in as a report and the out-of-home care setting is a foster home, group home, or a children's residential facility. This is called a cross referral report.
- B.** Additionally, OAC rule 5101:2-36-01(H) requires a PCSA to notify the licensing and supervisory authority no later than four working days from the screening decision to share information of screened out referrals of abuse and neglect when a principal of the report is a person responsible for the child's care in an out-of-home care setting pursuant to rule 5101:2-1-01.
- C.** The cross referrals must be directed to the agency's assigned licensing specialist. Should a cross referral be received for an agency assigned to another licensing specialist, the specialist receiving the cross referral will forward it to the assigned specialist, copying the licensing supervisor. Should a cross referral be received for another licensing authority, the specialist or supervisor will contact the PCSA to notify them.
- D.** If the cross referral pertains to a foster home, the licensing specialist should review the referral for an indication of whether there would have been a corresponding licensing violation pertaining to the foster home. SACWIS should be used to obtain additional information. The specialist should contact the PCPA/PNA to make sure they are aware of the cross referral and shall also do the following:
 - 1.** Maintain all foster home cross referrals that are screen-outs by the PCSA pursuant to 5101:2-36-01(H) in a folder for follow-up at the next scheduled visit to the agency, which may include a technical assistance visit. At the next visit, the foster caregivers listed on any screened-out cross referrals, should be checked to see if a rule violation investigation was conducted on the home(s).
 - 2.** If a specific referral is of a serious nature, if multiple referrals are received on the same home, or if there is a screened in abuse/ neglect report on the foster caregiver, the licensing specialist shall request a copy of the allegation of rules violation report pursuant to 5101:2-5-28(E) to determine if the agency is investigating allegations appropriately.
 - 3.** The licensing specialist shall provide technical assistance, as necessary and open a

technical assistance study in OFCL as applicable; or, if the agency is not following the procedure for rule violation investigation, a complaint may be opened and a citation issued at the discretion of the specialist and licensing supervisor.

- E. If the cross referral pertains to an agency or residential facility, the licensing specialist should review the referral for an indication as to whether a licensing rule violation may have occurred, then proceed with the following as applicable:
1. Contact the PCSA or review SACWIS for additional information, if necessary.
 2. If there are allegations of a possible rule violation(s), initiate and conduct a complaint investigation pursuant to this chapter.
 3. The licensing specialist should attempt to coordinate the interview of the alleged child victim or others with the PCSA and/or third party investigator (police) in accordance with OAC 5101:2-36-04 (L)(4).
 4. If it was clear that there was no allegation pertaining to a rule violation and a alleged rule violation investigation was not warranted, file the referral in OFCL during the next licensing review as miscellaneous correspondence.
- F. There is no specific number of cross referrals that would imply the initiation of revocation proceedings for a foster home, residential facility, or agency. However, the family, facility, and/or agency should be closely monitored, for continuous receipt of cross referrals.

XII. Child Fatality Review Procedure

- A. The agency director must be notified of any child fatalities in out of home care settings. Immediately upon being notified of a child fatality, the licensing specialist shall notify, via email, their licensing supervisor and copy the Bureau Chief of any fatalities in foster care, licensed facilities or pre-finalized adoptive placements. Information may be shared between the assigned technical assistance specialist or technical assistance manager, if warranted.
- B. Pursuant to OAC 5101:2-42-89 (A)(3), the PCSA and PCPA must complete the JFS 01987 Child Fatality Report Face Sheet and send it to ODJFS within 5 working days from the date of receiving the report of the fatality. The PCSA or PCPA is to send JFS 01987 Child Fatality Report Face Sheet report to the assigned District Office. If a report is not received, the licensing specialist is to contact the agency and request a copy.
- C. Child Fatality Reviews are recorded in OFCL as a complaint study type, if specific rule

violations are noted in consultation with the licensing supervisor. Refer to the complaint procedures outlined previously in this chapter. Procedural timeframes for child fatalities may be delayed due to a PCSA investigation of Abuse/Neglect or a police investigation. Consideration should be provided to staff and residents who are grieving.

XIII. 5101:2-33-80 RAPBACK: Retained applicant fingerprint database information exchange

- A. When a certified foster caregiver, approved adoptive parent, or any other adult in their household is fingerprinted in relation to a crime, the Attorney General’s (AG) office will notify the agency’s Overall Rapback Administrator and anyone else the agency has set up to receive these notifications. The AG’s office will simultaneously notify the Ohio Department of Job and Family Services (ODJFS) enforcement coordinator and the licensing agency of the enrolled person. The ODJFS enforcement coordinator will then notify the assigned licensing specialist and supervisor. This is referred to as a “RAPBACK notification.”
- B. Upon being informed of a RAPBACK notification, the licensing specialist shall maintain all information. A review of the JFS 01301 Retained Applicant Fingerprint Database Post-Notification Report can be completed in SACWIS. If the JFS 01301 is not in SACWIS, and it has not been received via email, the specialist shall request from the licensing agency for the JFS 1301 to be completed in SACWIS.
- C. If an agency is continually noncompliant regarding this procedure, the specialist should consult with the licensing supervisor and conduct a complaint investigation per paragraph IV of this chapter and OAC 5101:2-5-11.
- D. The licensing specialist shall detail on the *Appendix BB* Review Summary at the time of recertification, the number of RAPBACK notifications an agency received in the certification period and detail in the narrative if there were any issues with the agency maintaining compliance with requirements as specified in 5101:2-33-80.

I. Purpose

- A. The amendment is a process to make changes to previously submitted information on the JFS 01290 “Application for Certification of Agency Functions” which has impacts the certification of the agency. These changes normally change the issuance letter or the face of the certificate.
- B. The closure process outlined in this Chapter is identified as an agency’s decision to close.

II. Amendment Process

- A. *Refer to 5101:2-5-02(I) for circumstances that require an amendment and the timelines in which an agency is required to submit a JFS 01290.* Within 5 working days of receipt of written or verbal notification from an agency of the need to amend a certificate, the licensing specialist will respond via email requesting the amended JFS 01290 application and any required supporting documents.
- B. Upon receipt of the JFS 01290 and supporting documentation, the licensing specialist shall create a new study in OFCL for each amendment application submitted. Once the JFS 01290 and supporting documentation is received, the specialist shall conduct a desk review within 10 days to determine if the JFS 01290 packet is complete.
 - 1. The licensing specialist should compare the amended application with the last application received or the most recent issuance letter. Any inconsistencies, except for the noted amendments should be addressed with the agency. Specifically look for the director’s name, the functions, the board chair, and residential information.
 - 2. If the requested effective date of amendment identified on the application changes, the licensing specialist must explain the change of date in the narrative of the Appendix BB.
 - 3. An application that includes both recertification and amendment information is not considered incomplete or incorrect if the information contained on it is complete and timely. However, it will have to be returned to the agency with instructions that the recertification application and the amendment application must be processed separately and requires the submission of separate JFS 01290 Applications and supporting documents.
 - a. It may be necessary to have the agency change the effective date of the amendment, depending on the timing of the amended change.

Again, documentation is required on the issuance letter and in the Append BB summary.

4. The agency cannot begin to operate a new branch/function/facility until the amended certificate and issuance letter have been received.
- F. If an agency is under a Temporary Certification and submits an amended application to change the administrator, relocate a branch office or close a facility, the licensing specialist may accept and process the amended application provided the application does not expand and/or add functions under the temporary certificate.
- G. If an agency is on a 119, the amended applications should not be processed in OFCL until the pending certificate is issued. This is necessary to ensure the correct sequence of events.
- H. If an agency changes the name of a facility, but all else remains constant, an amendment is not required by rule. The licensing specialist will send an e-mail to SACWIS and a copy to the licensing supervisor to advise them of the change. Include in the email what the former facility name used to be and the current name. Include the date the name changed.
1. For temporary relocation due to remodeling or structural changes refer to the licensing supervisor and rule 5101:2-5-02 (I)(3) for guidance.
 2. For an agency name change, the amended article of incorporation, board approval of the name change, policy revisions to reflect the name change, as applicable, and the JFS 01290 must be submitted.
 3. If there is a change of ownership, an amended application cannot be accepted. The new agency must submit a new application per 5101:2-5-03 (E). The existing certificate is not transferable from one owner to another.

III. Amending Articles of Incorporation

- A. A corporation may file amendments to Articles of Incorporation with the Secretary of State pursuant to ORC Sections 1701 and 1702.
- B. ORC Section 5103.04 requires that proposed amendments be submitted to ODJFS for examination prior to recording by the Secretary of State to determine that the corporation in question "... is performing in good faith the work undertaken by it, and that such amendment is a proper one, and for the public good".

- C. This examination required of ODJFS in ORC 5103.04, has never been given any more specific parameters than those stated in the statute. Any questions regarding this review should be directed to the licensing supervisor.
- D. The assigned licensing specialist will review the proposed amended articles and supporting documentation (required in the Appendix letter) to determine if the information is complete and correct and if the stated purpose describes what the agency is proposing to do. The specialist will prepare the *Appendix C* and return to the agency, along with the approved articles of incorporation.
- E. If the amended Articles of Incorporation have already been filed with the Ohio Secretary of State, the agency only needs to submit a copy of amended articles to the assigned licensing specialist.

IV. Amendment is Withdrawn:

- A. If an amendment is submitted and then later withdrawn, the amendment study in OFCL must be closed. The option indicating that the amendment was withdrawn is selected.
 - 1. Complete the Append BB narrative to capture the circumstances of the withdrawal.
 - 2. Add a comment in OFCL on the Case tab briefly addressing the withdrawal of the amendment.
- B. If the agency also decides to close when the amendment is withdrawn; a closure study is opened in OFCL. Refer to section V of this chapter for additional information.

V. Agency Closures

- A. When an agency plans to close, written notification should be provided to ODJFS. If possible, the notification should be signed by the board president and the agency administrator.
 - 1. If an agency closes without notifying ODJFS and ODJFS becomes aware of the action, the licensing specialist will attempt to contact the agency to solicit an official written notification and effective date of closure. A site visit may be warranted and must receive supervisory approval prior to the on-site visit.
 - 2. If the agency closure involves a residential facility, the licensing specialist will verify the closure either by accepting a written statement signed by the agency administrator indicating an effective date that residents are no longer residing at the

- facilities or conducting a site visit within 30 working days of the official closure date. The specialist must obtain supervisory approval prior to conducting an onsite visit. If the specialist has reason to doubt that a residential facility does not have residents living in it at the time of closure, the specialist may contact the licensing supervisor for approval to visit the site.
- B. The licensing specialist will request the agency submit its current certificate, to be included with the closure review. If the closure corresponds with the expiration of the current certificate, the relinquishing of the certificate is not necessary. As a follow up to a failure to reapply, the *Appendix Z-3* letter is sent to the board president upon the expiration of the current certificate.
 - C. For agencies that close with currently licensed foster homes and or approved adoption studies, the licensing specialist shall request a letter from the agency documenting the transfer of homes (if applicable). The letter should list the name and SACWIS ID of all the active foster/adoptive homes; the date of transfer; and the name of the agency that accepted the transfer.
 - D. Prior to closure, all agencies shall submit an updated criminal background check list and documentation required of all direct care staff hired and all foster and adoptive caregivers approved since the last quarterly list submitted pursuant to Chapter 8- II. C. of this manual.
 - E. Agencies should be reminded that they are to follow their records management policy regarding the retention of closed files. Any variation must be addressed with the licensing supervisor.
 - F. If an agency closes prior to the completion of the home study transfers, the licensing specialist will contact the licensing supervisor and/or the enforcement coordinator for assistance.
 - G. The licensing specialist will prepare a closure study in OFCL. All documentation such as the letter of intent to close, a copy of relinquished certificate, etc. is to be scanned and attached to the study.
 - H. The licensing supervisor will review the closing study and process it via OFCL within 10 working days.

I. Purpose

The purpose this chapter is to outline the process to receive, review, approve and store criminal background checks for all direct care employees of residential facilities, foster and adoptive parents and applicants to ensure 100% compliance with Ohio Administrative Code.

II. Receiving Criminal Background Checks

- A. For the initial phase-in of the 100% review of criminal background checks, all agencies will be required (with exceptions listed below) to submit a list using the ODJFS 1291 form fax coversheet and criminal background check documentation of all current direct care employees, foster parents, and adoptive parents pursuant to FCASPL 314. See link below for additional details:

[http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_FCA.htm%3ASRC%23%2F1%2F2%2F1%2F3%2F2%2F1&locSource=input&docId=Document\(storage%3DREPOSITORY%2CdocID%3D%23node-id\(129448\)\)&titleIndx=1&version=8.0.0](http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_FCA.htm%3ASRC%23%2F1%2F2%2F1%2F3%2F2%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(129448))&titleIndx=1&version=8.0.0)

1. After the initial lists and criminal record check documentation are received, agencies will be required to submit subsequent lists and documentation on at least a quarterly basis.
 - a. The assigned specialist is not required to send out a reminder about quarterly lists. Agencies are just expected to meet this deadline.
 1. If agency does not submit the required list and documentation within 15 calendar days of the due date, the assigned Specialist may conduct an unannounced onsite visit to collect the needed information.
 2. If the specialist is unable to obtain the requested information, consult a supervisor.
 - b. The assigned specialist will send an acknowledgement letter or email to the agency upon receipt of the quarterly list and documentation.
 - c. Agencies are permitted to send updated lists and criminal background check documentation at any time other than just quarterly.

- B. Copies of the BCII and FBI checks or verification of five years of Ohio residency for all direct care employees, foster parents, and adoptive parents identified on the quarterly lists provided by their agencies may be obtained in one of the following ways:
 - 1. Agencies shall fax the background checks using the Kofax system.
 - 2. Specialists may obtain or scan in copies during an on-site review, if a hardship exists preventing agencies from utilizing the Kofax system.
 - 3. BCII may send the information directly in an electronic file or as a paper copy directly to ODJFS, if such technology or process exists.
- C. When a residential facility closes, the specialist shall request that the agency send a final quarterly list of all direct care employees and the corresponding criminal background check documentation.

III. Storing Criminal Background Checks

- A. All criminal background check information and documentation is to be stored in the OFC Background Check Document Management System (OFCCBC or BCII Filenet). The program may be accessed by opening a browser and typing the following:
 - 1. <http://ofclwp.odjfs.state.oh.us/ofclwp/WcmSignIn.jsp?targetBase=http%3A%2F%2Fofclwp.odjfs.state.oh.us%2Fofclwp&originPort=&originIp=10.9.10.67&targetUrl=WcmDefault.jsp>
 - 2. Enter your Novell User ID in the Name field and Novell Password in the Password field and click Sign In.
- B. The current process requires the Licensing Specialist and Supervisor to access, search, add, and approve criminal background check documents and process workflow items in the OFCCBC-Filenet queues. The categories used are:
 - 1. FCL Background Check Documents
 - a. Add FCL background check document
 - b. Search FCL background check document
 - 2. FCL Background Check Document Processing Queues

- a. FCL BC Document Processing – Licensing Specialist Inbox
 - b. FCL BC Document Processing – Supervisor Inbox
 - c. FCL BC Error – Admin Box
- C. Please see the *OFC Background Check Document Management System User Manual, Ver. 1.0* for addition details on the system.

IV. Reviewing and Approving Criminal Background Checks

- A. All BCII and FBI checks or verification of five years of residency must be reviewed by the specialist in the OFCCBC/BCII Filenet system as soon as possible but no later than the due date for the next quarter.
- B. Specialists will be required to review the following:
- 1. Timeliness of the criminal background checks.
 - a. If a criminal background check is not timely for a direct care employee (employees counted in ratio), foster parent, or adoptive parent, and the record was not addressed previously through a corrective action plan, the criminal record check will be marked “Non-compliant” (reference paragraph E below), and a complaint study shall be created and the agency shall be cited for timeliness issues, as applicable. (See Chapter 6)

Note: Multiple records from the same agency may be addressed in one complaint study.

 - b. If a criminal back ground check is not timely for a direct care employee (employees counted in ratio), foster parent, or adoptive parent, and the record was addressed previously through a corrective action plan, the criminal record check will be marked “Compliant”, and the study ID number from Filenet along with language suggesting the record was brought into compliance via a CAP will be noted in the comment section.
 - 2. Compliance with the criminal background check being run under the correct ORC Code 2151.86.

- a. For staff hired after October 1, 2015, if a criminal background check has an incorrect ORC code noted on the BCII letter, technical assistance is given and the criminal background check must be re-completed under the correct code.
 - b. For all current foster and adoptive parents, and applicants which were licensed or approved after October 1, 2015, if a criminal background check has an incorrect ORC code noted on the BCII letter, technical assistance is given and the criminal background check must be re-completed under the correct code.
 - c. After the initial technical assistance is given to an agency any repeated non-compliance will warrant a complaint being opened and an agency being cited.
- 3. Compliance with rehabilitation requirements, if applicable.**
- a. Agencies are required to send in documentation of how direct care employees, foster parents, and adoptive parents have met rehabilitation standards if they have been convicted of a prohibitive offense.
 - b. If an agency cannot produce this documentation, then a complaint study shall be created and the agency shall be cited.
 - c. Any criminal background check identified as “May Not Meet Employment Qualifications” that is received without the rehabilitation standards, should remain in the system in “pending” status until the agency submits the rehabilitation documentation.
- C.** Any criminal background check that has out of state convictions shall be reviewed with the specialist’s supervisor.
- D.** Specialists are no longer required to answer the questions regarding criminal background checks on the eForms for direct care employees (employees counted in ratio), foster and adoptive parents, excluding household members. All questions should be marked as “N/A” for all reviews other than complaint investigations.
- E.** All specialists shall mark as “Compliant” or “Noncompliant” from the drop down list within the OCFBC/BCII Filenet system, for each criminal background check reviewed. All comments should be noted in the “Comments” section of the record and the “Complete” button should be clicked.

- F. Once routed from the assigned licensing specialist, each supervisor shall mark as “Approved” or “Rejected” from the drop down list within the OFCCBC/BCII Filenet system for each criminal background check reviewed. All comments should be noted in the “Comments” section of the record and the “Complete” button should be clicked.

- G. Please see the *OFC Background Check Document Management System User Manual, Ver. 1.0* for addition details on the system.

I. Purpose

- A. The purpose of the exit conference is to inform the administrator or administrator designee of the findings of the review, by presenting any areas of noncompliance in writing on the *Summary of Findings of Noncompliance, Compliance Summaries, Technical Assistance, Corrective Action Plan and Appeals* form and the list of records.

II. Summary of Findings of Noncompliance

- A. The Summary of Findings of Noncompliance shall be reviewed with the licensing supervisor prior to exiting with the agency. This can be completed by either sending the supervisor an email with the OFCL study number that the SOFN is available for review, or by emailing an attachment of the SOFN to the supervisor, or by reviewing it in person.
- B. Upon completion of the on-site review, reconciliation conference(s), and supervisory approval of the Summary of Findings of Noncompliance, the licensing specialist shall conduct the exit conference pursuant to one of the following methods:
 1. Present to the administrator or administrator designee the *Summary of Findings of Noncompliance, Compliance Summaries, Technical Assistance, Corrective Action Plan and Appeals* form, and the list of records prior to leaving the agency.
 2. If the licensing specialist plans to exit while onsite, they shall notify the licensing supervisor for approval and allow the supervisor to review the Summary of Findings of Noncompliance through OFCL FileNet, email the SOFN hard copy, or provide a summary verbally.
 3. Present to the administrator or administrator designee in person, the *Summary of Findings of Noncompliance, Compliance Summaries, Technical Assistance, Corrective Action Plan and Appeals* form, and the list of records within **15 working days** after completing the on-site review.
 4. Send the *Appendix W, Summary of Findings of Noncompliance and Compliance Summaries, Technical Assistance Summary, Corrective Action Plan and Appeals* form, and the list of records by email or certified email through Outlook or using (JFSSECURE) within **15 working days** after completing the on-site review. Contact the agency administrator or administrator designee or designee by phone to explain the *Summary of Findings of Noncompliance*, if appropriate. The email shall include a statement indicating this is the formal exit.
 5. If there are no findings of noncompliance, the licensing specialist may conduct an exit conference at the time of reconciliation, and shall provide the agency with the

Appendix WW and following documents; or may choose to leave the agency and send the *Appendix WW* with the following documents attached:

- a. List of records reviewed
 - b. Compliance summaries, as applicable
 - c. Technical assistance, as applicable
- C. All findings on the review forms are tabulated in OFCL and recorded on the respective compliance summaries.
 - D. As a part of the exit conference, the licensing specialist will present the administrator or administrator designee with a copy of all exit documents. Upon request, the specialist shall provide copies of any completed review forms.
 - E. The licensing specialist should attempt to obtain a signed copy of the exit documents to verify receipt of the documents. If an administrator or administrator designee refuses to sign, the specialist must document on the *Summary of findings of Non-compliance* “refused to sign” and document the reason or circumstances for the refusal on the *Appendix BB Review Summary or Complaint Disposition Form*.
 - F. If an agency administrator or administrator designee disagrees with any of the findings of noncompliance cited on the Summary of Findings of Noncompliance, the agency has the right to appeal pursuant to OAC 5101:2-5-05. (Refer to the Corrective Action Plan and Appeals form)

III. Appeal Process

- A. Once an agency has received the Summary of Findings of Noncompliance, an agency has up to 10 working days to submit an appeal of any findings. Upon receipt of an appeal, the licensing supervisor shall, if requested, arrange a meeting by phone or in person with the appellant prior to the review of the appeal. The supervisor shall conduct a review or convene a meeting within **15 working days** of receipt of the appeal. The supervisor shall render one of the following written decisions within **10 working days** of the review or meeting if one is held:
 1. Agree with the entire appeal and provide a written explanation to the agency of the approval.
 2. Disagree with the entire appeal and provide a written explanation to the agency of the disapproval.

3. Partially agree with the appeal and provide a written explanation to the agency of those portions of the appeal with which the supervisor agrees and disagrees.
- B. The decision of the licensing supervisor shall be final and does not entitle the agency to any hearing rights under Chapter 119 of the Ohio Revised Code unless ODJFS initiates action to deny or revoke certification. The decision shall be sent by certified email to the agency administrator, copying the licensing specialist.

IV. Review Of Corrective Action Plan, If Applicable:

- A. For any citation of noncompliance on a Summary of Findings of Noncompliance, the agency is required to submit a corrective action plan:
1. Within **15 working days** from the date of the exit, or
 2. Within **15 working days** of the decision of the final level of appeal, as applicable, or
 3. If an agency appeals only some of the findings, the CAP is due **15 working days** from the date the summary of finding was issued for the findings that were not appealed and the additional CAP is required **15 working days** from the date of receipt of the final decision on the appeal if a CAP is still required.
- B. Upon receipt of a corrective action plan, the licensing specialist must review the plan within **10 working days** to determine if it specifically addresses the following items:
1. What the agency is going to do to correct the area of noncompliance
 - a. Explanation of how the agency will correct the area of noncompliance OR
 - b. Explanation of why the agency cannot correct the area of noncompliance.
 2. How noncompliance will be prevented in the future
 - a. Explain systematic changes, utilization of tickler systems, training of current/new employees, form revisions, quality assurance procedures, etc...
 3. Who in the agency will be responsible for the implementation of the corrective action plan?
 - a. Document the individual and/or all those involved in a chain of command within the agency.
 4. How the agency will document that the corrective action plan has been implemented?
 - a. Document how the agency will verify that the corrective action plan has been implemented.

5. The time line for implementation of the corrective action plan.
 - a. The maximum time allotted for implementation is **30 days** from the date the corrective action plan is approved, unless more time is given by written supervisory approval. If the agency specifies a timeframe less than **30 days** for implementation, the agency will be held to the timeframe specified.
- C. A Licensing Specialist shall forward a pending approved CAP for Supervisory review prior to submitting an *Appendix I* CAP approval letter.
- D. Procedure for requesting supervisory approval for an extension of the 30 day timeframe for implementation of the CAP after the CAP has been approved.
 1. The agency may ask for an extension to the timeframe to implement after the CAP has been approved. The request must be submitted by the administrator or administrator designee.
 2. The request must be in writing and sent to the licensing specialist.
 3. The licensing specialist may prepare the draft approval and forward to the licensing supervisor per request.
 4. After consulting with the licensing supervisor, a written response indicating the approval or disapproval of the additional time must be sent to the agency
- E. If the corrective action plan is complete and approved, the licensing specialist will notify the agency administrator or designee by email (See *Appendix I*) within **10 working days**.
- F. If the corrective action plan is not acceptable, the licensing specialist will notify the administrator or designee of the agency in writing by certified email, (See *Appendix J*) within **10 working days**.
- G. If the first plan is not acceptable a second corrective action plan must be submitted to the licensing specialist within **10 working days** of the agency's receipt of notification regarding the disapproval of the initial plan.
- H. If the licensing specialist does not accept the subsequent corrective action plan, a third corrective action plan may be requested, with supervisory approval or the review material may be submitted to the licensing review committee. (See Chapter 12)
 1. Failure of an agency to timely submit a corrective action plan, absent any appeal of findings of noncompliance, is not sufficient cause to request issuance of an ORC 119

letter, and may result in a lapse, denial, or revocation of certification.

I. Purpose

- A.** The purpose of technical assistance and self-reporting is to assist agencies in achieving and maintaining compliance with all applicable OAC rules without the need, depending on the circumstances, for findings of non-compliance and formal corrective action plans.
- B.** Technical assistance may include onsite visits with no findings issued, record reviews, clarification of rules, assistance in writing policies, recommendations for systematic changes, and individual, statewide, or regional trainings.
- C.** Self-reporting is any rule violation that has occurred and is reported directly by the agency to ODJFS Licensing. See exceptions in Section IV.
- D.** These processes are used as an alternative to traditional reviews and issuance of findings of non-compliance to assist the agency in improving compliance with the OAC rules, establish and maintain supportive relationships with agencies, foster communication, and improve outcomes for children in care.

II. Technical Assistance Visit:

- A.** At least one technical assistance visit shall be offered anytime during the certification period for each agency.
 - 1.** Technical assistance visits are to receive no findings of non-compliance.
 - 2.** The licensing specialist shall develop a written agenda with proposed topics pertinent to the agency's needs and notify the licensing supervisor for input and consultation.
 - 3.** A technical assistance visit shall be offered to agencies that are subject to a corrective action plan for the most recent visit prior to the technical assistance visit. Based on record-related, onsite, or additional findings.
 - 4.** A technical assistance visit is not required for agencies that are not subject to a corrective action plan at the most recent visit, although a visit may be offered.
- B.** Technical assistance provided to an agency during the technical assistance visit may be specified on a review tool or letter, as applicable. If record reviews are warranted, the licensing specialist may select from 2-5 records depending need.

- C. Technical assistance visit documentation procedure.
1. To acknowledge receipt, the licensing specialist will request the administrator or designee's signature once the technical assistance document is reviewed.
 2. The technical assistance visit will have its own study in OFCL (pending OFCL functionality). Currently, specialists shall note technical assistance visits as a "Visit" in the system and make a note that the visit is for technical assistance only in the audit page via the comments section in OFCL.
 3. Licensing specialist shall complete the *Appendix BB Summary Form* and upload into the study.
 4. Licensing specialist shall attach all documentation and upload into the study.
 5. If the Technical Assistance visit does not occur, the licensing specialist shall document that a Technical Assistance visit was offered and the reason it did not occur in the *Appendix BB Review Summary form* of the next Re-certification visit for the agency.

III. Technical Assistance by Phone or Email

- A. Technical assistance may be provided outside of reviews by phone, email, or other formats. Licensing staff may consult with other licensing staff, technical assistance specialists, policy staff, or with PFOF Team members as necessary to address agency needs.
- B. Licensing staff may utilize a Sharepoint database for storing all collaborative technical assistance that involves the use of the Regional Team or policy staff, if such a program is being utilized.

IV. Self-Reports

- A. The licensing specialist shall review the self-report and documentation within three (3) working days of receipt.
1. If there is more information needed, the licensing specialist may request additional documentation.
 2. If there is a rule violation(s):

- a. In consultation with the licensing supervisor and based on the exceptions listed below, a licensing specialist may determine to conduct a complaint investigation.
 - i. Exceptions to self-reporting: serious health and safety violations, violations of children rights
 - b. Refer to Chapter 6 for the complaint procedure.
3. If the self-report does not result in opening a complaint investigation, the licensing specialist shall process the rule violation as a self-report.
- B. The licensing specialist shall request written documentation of steps taken by the agency as a result of the self-report within 30 days.
- C. A Self-Report study shall be created in OFCL *FileNet* based on functionality. If the functionality does not exist, the information shall be maintained and uploaded into the next Recertification or Additional Visit, whichever occurs first. A summary of all self-reported incidences shall be documented on the *Appendix BB Summary* in the study.

I. Agencies Licensed by Another State Entity

- A.** Agencies licensed by other state entities (e.g., Ohio Department of Mental Health and Addiction Services, Ohio Department of Developmental Disabilities, Ohio Department of Youth Services,) may wish to operate functions certified by ODJFS and/or obtain certification of their facilities currently certified by another state entity.
- B.** Ohio Revised Code Section 5103.03 states that ODJFS “shall adopt rules as necessary for the adequate and competent management of institutions and associations.” Section 5103.02(A) defines “association” or “institution” for purposes of sections 5103.03 to 5103.17, to include “any incorporated or unincorporated organization, society, association, or agency, public or private, that receives or cares for children for two or more consecutive weeks;...provided, that any organization, society, association, school, agency, child guidance center, detention or rehabilitation facility, or children’s clinic licensed, regulated approved, operated under the direction of, or otherwise certified by...the department of youth services...shall not be considered as being within the purview of these sections.” Section 5103.03 then sets out the duties and responsibilities of ODJFS regarding the management and certification of “institutions” and “associations”.
- C.** For procedures pertaining to the application for certification for agencies licensed by other state entities, the licensing specialist should consult with their supervisor and refer to Chapter 1.

II. Illegal Operations

- A.** An “illegal operation” is an agency that is currently performing the specific functions ODJFS certifies pursuant to OAC 5101:2-5-03 but is not certified by ODJFS or any licensing entity or authority for the State of Ohio.
- B.** If an agency is suspected to be operating illegally, a referral must be made to the licensing supervisor for the field office with jurisdiction for the county where the agency is located.
- C.** Upon receipt of a referral of an alleged illegal operation in the field office, the licensing supervisor will assign the referral to a licensing specialist.
- D.** When the licensing specialist is assigned the alleged illegal operation, they will investigate to screen if the alleged illegal operation is licensed by another entity.

The licensing specialist can check the Secretary of State's website at <http://www.sos.state.oh.us>, to obtain any information regarding the agency's incorporation status. The specialist may also check with other state licensing entities, such as the Ohio Department of Mental Health & Addiction Services, The Ohio Department of Education, The Ohio Department of Developmental Disabilities, and SACWIS.

- E. The licensing specialist will record required information on the statewide Alleged Illegal Operation Investigation Outcome log.
- F. After determining that the alleged illegal operation is not licensed by another entity, the licensing specialist will send the Appendix DD letter by certified mail, return receipt requested.
- G. The agency will be given 10 working days from receipt of the letter to respond. If a response is received, skip to section IV of this chapter. If a response is not received, the licensing specialist will contact the licensing supervisor and refer to section III of this chapter.

III. No Response from Agency

- A. If there has been no response after 10 working days from the date of the receipt of the U.S. Postal Service Domestic Return Receipt (PS 3811) indicating the letter was received, the licensing supervisor and assigned licensing specialist will conduct an unannounced on-site investigation within 20 working days of receipt of the PS 3811.
 - 1. If the letter has been returned undelivered, the assigned licensing specialist will again send the Appendix DD letter by certified mail, return receipt requested, and by regular mail, simultaneously within 5 days.
 - a. If the agency does respond prior to the unannounced inspection, the assigned specialist will proceed pursuant to section IV of this chapter.
 - b. If no response has been received within 10 days, the assigned specialist and licensing supervisor shall conduct an unannounced on-site investigation within 15 days after the second mailing.
 - 2. The assigned licensing specialist may consult with the enforcement coordinator at any point in the process after conferring with their supervisor.

- B.** If the agency is located in another state but is conducting business in Ohio, the assigned licensing specialist is to contact the appropriate state official to determine if the agency is certified by that state.
- C.** The on-site investigation will be conducted by a least two licensing staff at all times. Other department staff may accompany the licensing staff as necessary.
 - 1.** Upon arrival at an agency the licensing staff is to identify him/herself to the highest ranking staff member present in the agency for the purpose of informing the agency that an investigation is to occur and the manner in which it is to be conducted.
 - 2.** If the licensing staff is denied access, entrance, or the opportunity to investigate, state or read to the individual denying access or entrance, for the record, Section 5103.03 of the Revised Code (see Appendix DD) as follows:
 - a.** "Section 5103.03(A), (B), and (H) of the Ohio Revised Code mandates ODJFS adopt rules as necessary for the adequate and competent management of institutions or associations. It also gives ODJFS the authority to seek injunctive relief upon showing an institution or association is operating without a certificate."
 - b.** "Do you understand that we have the authority to conduct this investigation?"
 - c.** "Are you now denying us access to your agency and are refusing to allow us to conduct this investigation?"
 - 3.** If staff is allowed to conduct the investigation, proceed.
- D.** An investigation (announced or unannounced) will include as applicable, at a minimum:
 - 1.** A physical inspection of the facility. A JFS 01340 On-Site Inspection of Residential Facilities review form is to be completed, as appropriate, for each living unit.
 - 2.** A review of records and completion of the appropriate JFS review forms and compliance summaries.
 - 3.** Interviews with staff and residents.

4. A review of the agency's policies and completion of the appropriate Appendix MM.
 5. A review of the agency's compliance with rules not included on any of the specific review forms but related to the nature of the complaint is at the discretion of the licensing specialist and supervisor.
 6. A reconciliation interview pursuant to Section XI of Chapter 2.
 7. A compilation of the review pursuant to Section XVII of Chapter 2.
 8. A recommendation of the review pursuant to Section XV of Chapter 2.
 9. A follow-up of the review pursuant to Section VIII of Chapter 1.
- E. If not allowed to conduct the investigation or unable to conduct the investigation, leave the premises. Within 24 hours of being denied access or unable to conduct an investigation, the licensing supervisor or specialist will inform the Bureau Chief and enforcement coordinator by email that the investigation was not conducted, with a full written account of the attempted investigation. This documentation should be maintained in a hard copy or computer file for future reference.
- F. The licensing supervisor, Bureau Chief, and the enforcement coordinator will determine the next course of action.

IV. Timely Response from Agency

- A. If a timely response from the illegal operation is received, the licensing specialist will screen the information for ODJFS jurisdiction.
- B. If the agency appears to fall under the jurisdiction of another licensing authority and is not already certified or licensed, the licensing specialist will return the information to the agency referring them to the appropriate licensing authority. The specialist will also inform the appropriate licensing authority within 5 working days of the referral. The specialist records the outcome on the log as a referral to a specific licensing authority.
- C. If the response indicates that the agency is performing functions that require certification by ODJFS, or it is inconclusive as to what function the agency is performing, the licensing specialist and supervisor shall conduct an unannounced, on-site investigation of the agency within 10 working days of receipt of the agency's

response. At this time, a study cannot be created in OFCL to capture the complaint investigation, however all documentation should be maintained in a hard copy or computer file for future reference.

- D.** If the agency falls under ODJFS jurisdiction and has submitted the Articles of Incorporation and supporting documentation (refer to Appendix DD letter), the information will be reviewed by the assigned licensing specialist for completeness and compliance with ORC Section 5103.04.
 - a.** This examination, required of ODJFS in ORC Section 5103.04, has never been given any more specific parameters than those stated in the statute. Any questions regarding this review should be directed to the licensing supervisor.
 - b.** The assigned licensing specialist will review the articles of incorporation and supporting documentation (required in the Appendix DD) to determine if the stated purpose matches the agency's current operation.
- E.** If the submitted information is incomplete or incorrect, the licensing specialist will return the inquiry information along with the Appendix B within 15 working days.
- F.** Within 30 working days of receipt of complete and correct inquiry information, the licensing specialist shall contact the inquirer and provide technical assistance regarding the agency certification process. If the inquirer wishes to continue with the certification process, the assigned specialist will prepare and send the Appendix D and initiate the initial certification process (refer to Chapter 1, Section II: Initial Application Process).
- G.** During the initial inquiry contacts, the licensing specialist shall advise the inquirer of the following:
 - 1.** Dates for upcoming New Agency/New Administrator training and registration information;
 - 2.** General expectations for (1) reporting child abuse and neglect, (2) full compliance on background checks (zero tolerance).
 - 3.** The existence of the Statewide Automated Child Welfare Information System (SACWIS) and the participation with SACWIS is a condition of certification.

- a.** SACWIS is an interactive system of databases maintained by ODJFS to store data from public and private agencies that care for children in and out of custody.
 - b.** Private agency inquirers who wish to recommend foster home certification and/or adoption approvals must complete the JFS 01318 “SACWIS Private Agency Provider Request” form when certifying or approving each home.
 - c.** Private agency inquirers who wish to operate residential facilities should be advised that the names and addresses of their facilities would be entered in SACWIS by ODJFS. This information is then maintained by ODJFS and utilized by placing agencies following initial certification.
 - d.** The phone number for the SACWIS Help Desk at 1-800-686-1580 or 614-466-0978 if the agency desires additional information about SACWIS.
- H.** If the agency does not wish to continue the process, the agency will be required to cease and desist operating the noncertified function that falls under ODJFS purview. The licensing specialist will contact the licensing supervisor and ODJFS Office of Legal Services for guidance on how to proceed.

I. Purpose

- A.** The License Review Committee (LRC) was created to share the responsibility in making decisions pertaining to enforcement actions (revocations, denials, and temporary certificates) with input aside from licensing specialist and supervisor involved with the agency. The purpose is also to involve the expertise of other professionals in making an enforcement decision, and lessen the possibility of any bias toward the agency.
- B.** The task is to evaluate the material presented in terms of relevance to the recommendation and determine if the recommendation is justified as a fair and appropriate consequence. The LRC has the capability to override the recommendation of the licensing specialist and/or supervisor or to present an alternate recommendation.

II. Enforcement

- A.** Enforcement is the process of denying an application, denying or revoking an existing certificate of an agency or foster home.
- B.** Enforcement may be initiated against a PCSA (with residential facilities), PCPA or PNA and any of their certified functions. Enforcement action against an agency is initiated by ODJFS.
- C.** Enforcement may be initiated against a foster care provider by the recommending agency or ODJFS.

III. Authority

- A.** The authority to write rules, inspect facilities, issue certificates and impose penalties is delegated to ODJFS under ORC Chapter 5103.
- B.** Chapter 119 ORC provides due process rights for any applicant or provider in the event of any proposed denial or revocation of an ODJFS certification.
- C.** Administrative hearing rules are found in OAC Chapter 5101:6-50.

IV. Licensing Review Committee (LRC)

- A.** The licensing specialist, licensing supervisor, Bureau Chief, or enforcement staff may make a recommendation to discuss pending sanctions against PCSAs, to issue or remove a Temporary Certificate, to deny initial certification, recertification or revoke the functions of an agency as a result of findings of noncompliance with applicable OAC rules, the failure of an agency to implement an approved corrective action plan (CAP),

and/or the failure of an agency to submit a CAP, or an agency's refusal to allow an investigation as part of:

1. Initial certification review (denial).
 2. Recertification review (temporary or denial of recertification).
 3. Complaint investigation regarding the agency's certified functions (temporary or revocation).
 4. Additional visits (temporary or revocation).
 5. Amendments (denial of additional function, etc...).
- B.** The licensing specialist assigned to the agency and the licensing supervisor shall confer to determine if any enforcement action is necessary if the initial application and required policies/procedures have been submitted 3 times or if the applicant has failed the onsite inspection three times.
- C.** The enforcement coordinator is available for consultation between the licensing specialist, licensing supervisor, and or Bureau Chief prior to and after making a recommendation to the LRC.
- D.** When an enforcement action is initiated a recommendation is made to the License Review Committee (LRC). The LRC consists of: the Bureau Chief, licensing supervisors, enforcement coordinator, a representative from the policy development section, and three licensing specialists (one as an alternate). Members are rotated on January 1st of every even numbered year based upon a list of all licensing specialists. Staff from the Office of Legal Services and Office of Fiscal and Monitoring may be consulted or requested to attend if deemed necessary.
1. Licensing supervisors shall ensure that a log of licensing specialists is maintained on the Q Drive that will show a rotation based on the different district office locations.
- E.** The licensing supervisor shall select a date to convene the LRC meeting and notify the committee members via e-mail appointment.
- F.** The licensing specialist shall complete the *Appendix II* (LRC Referral Form located on the Q drive), detailing the recommendation. The specialist shall include with the LRC form evidence and documentation to support the recommendation from the current licensing

period. This may include the JFS 01290 *Application for Certification of Agency Functions*, complaints, CAPs, summary of findings, letters, reports, policies, and review forms.

- G. The licensing specialist shall submit the information to the licensing supervisor via email. The supervisor distributes all information to the LRC members two weeks prior to the scheduled LRC meeting if possible. The LRC members shall review the information prior to the scheduled LRC meeting.
- H. During the LRC meeting, the licensing supervisor shall facilitate the discussion. The evidence is presented by the licensing specialist and supervisor. This may include the certification history of the agency and all issues preceding the recommendation for temporary certificate or enforcement action.
- I. Upon completion of the presentation of all evidence, all LRC members are permitted to ask questions and engage in a group discussion, as needed. Voting members consist of licensing supervisors, enforcement coordinator, a representative from the policy development section, and licensing specialists assigned to the LRC. Legal and fiscal staff are non-voting members of the LRC. A vote is held on the recommendation before the LRC. The possible recommendations are: denial of certification; denial of recertification; issuance of a temporary certificate; revocation of a certificate; or recertification. The vote cast by each member is to agree with the recommendation, disagree with the recommendation or recommend a different action. All votes are to be submitted in writing to the licensing supervisor. The FCL Bureau Chief shall cast the deciding vote, if a tie should occur.
- J. If the recommendation of LRC is the issuance of a temporary certificate, the effective date will be the issuance letter date.
- K. LRC shall be used to remove any agency from a temporary certificate prior to the expiration of the certificate.

V. Agency Enforcement Procedures: Denial of Certification or Recertification or Revocation for Agencies and Residential Facilities

- A. When the recommendation is to initiate an enforcement action, the licensing specialist and the licensing supervisor will work with the enforcement coordinator to prepare the enforcement action.
- B. The licensing specialist shall ensure copies of documents from the current and previous certification period to support enforcement action are uploaded in the OFCL FileNet

System. The following applicable documents must be accessible to the enforcement coordinator in OFCL

1. The License Review Committee referral form.
 2. For currently licensed agencies; *Summary of Findings of Noncompliance (SOFN)*, CAPs and CAP approval/disapproval letters, repeated citations (CAP violations), *Appendix BB*, summaries of interviews with clients/staff, and any other sources from which citations were issued and or CAP violations were verified, as applicable.
 3. The most recent JFS 01290 *Application for Certification of Agency Functions* and any pending applications.
 4. Any other documents as requested by the enforcement coordinator.
- C. The licensing specialist shall keep the licensing supervisor and enforcement coordinator informed of activities, contacts, complaints and ongoing monitoring. The specialist shall provide copies of all documents received or created such as Corrective Action Plans and *Summary of Finding of Noncompliance* to the supervisor and enforcement coordinator. The specialist shall update the supervisor and enforcement coordinator on other issues by email with the name of the agency in the subject line. The specialist shall notify the supervisor and enforcement coordinator by email:
1. Prior to ANY planned contacts with the agency.
 2. After being contacted by the agency. The licensing specialist shall submit a summary of the contact via email to the licensing supervisor and enforcement coordinator. The summary shall include specific information, including, but not limited to the date of the contact, the name of the agency staff, and a brief summary detailing the nature of the contact.
- D. During the enforcement process, the licensing specialist should not accept from the agency any documentation related to the enforcement action. If the specialist returns to their office and finds someone else has accepted the documentation or the agency mailed the documentation to them, notify the enforcement coordinator of the receipt of information and return the materials to the agency, and indicate that the items were received in error.

VI. On-Going Monitoring

- A. Currently Certified Agencies:** Ongoing monitoring will continue during the enforcement process. The licensing supervisor and/or specialist shall contact the enforcement coordinator for direction. The specialist will continue to conduct the required activities outlined in this procedure manual upon approval from the enforcement coordinator and based on recommendations from the Attorney General's Office. Refer to C 1-3 below for further direction.
- B. Initial Applicants (not certified):** If the pending enforcement issue is the denial of an initial certification and the agency is either not yet doing business; or is an illegal operation or is attempting to transition from another state department to ODJFS then the following applies:
1. Any contact should be only as a response to an agency initiated contact in its attempts to come into compliance. Those contacts would be acted upon to avoid any appearance of a lack of cooperation or failure to provide assistance.
 2. If this is an illegal operation, ODJFS would have the continued responsibility to investigate any complaints received. New complaints must be submitted to the enforcement coordinator who will contact the Assistant Attorney General assigned to the case or the Office of Legal Services.
 3. Complaint investigations shall be conducted by at least two ODJFS staff and should follow the complaint procedure.
 4. The assigned licensing specialist will take the lead in conducting the investigation. If more than one team is needed or if team members are pulled from more than one field office, the licensing supervisor will coordinate.
- C.** If the pending enforcement action is a denial of recertification or revocation, the agency's certification continues in effect.
1. The monitoring of the agency continues upon approval from the enforcement coordinator while the enforcement action is pending. All certification activities shall continue during this time, additional visits, recertifications, complaint investigations. Should the agency's current license expire prior to the completion of the enforcement action, the agency is entitled to a Chapter 119 extension of the license.
 2. The results of the monitoring should be sent to the enforcement coordinator. The licensing specialist shall acknowledge receipt of a CAP in writing, however the CAP should not be reviewed and approved.

2. When making notes regarding records, be precise in noting what you observed and what is or is not in the file.
- B. Prior to giving testimony in a case before a hearing examiner the licensing specialist should be familiar with the agency review studies, complaint reports, documents, correspondence, and chronology of events.
- C. The licensing specialist should never discuss the case with the opposing attorney or anyone outside the department without the presence of an ODJFS staff attorney or an Assistant Attorney General unless one of these persons has given permission to discuss the case.
- D. The licensing specialist should comply with meeting the Assistant Attorney General prior to the hearing to discuss the hearing process and to go over testimony and review the documentation.

VIII. Hearings

- A. If a hearing is requested, a pre-hearing conference will be held with the assigned hearing examiner and all parties involved. This conference is for establishing the facts of the case, how the case will proceed, and to schedule the hearing date. Staff from the Assistant Attorney General, Health and Human Services Section, represent ODJFS at the pre-hearing and hearing.
- B. At the hearing, the hearing examiner will preside; witnesses may be called, examined, and cross-examined. A court recorder will create a transcript of the proceeding.
- C. Following the hearing, the hearing examiner will review the evidence, the transcript, and will make a recommendation to the director, usually in **90 to 120 days**. There is no timeframe specified in law or rule for rendering a recommendation.
- D. If the applicant, agency, or foster caregiver disagrees with the recommendation of the hearing examiner, an appeal may first be made to the Director of ODJFS who has the authority to accept, amend, or reject the recommendation of the hearing examiner. ODJFS will then send the Adjudication Order (AO).
- E. The agency or foster caregiver may then appeal the decision to the Court of Common Pleas in either Franklin County or the county in which the agency or foster caregiver is located.

- F. If the applicant, agency, or foster caregiver does not request a hearing, the Enforcement Coordinator will draft a final Adjudication Order (AO) for the deputy director's signature. The AO advises the applicant/agency/foster parent that the certification has been denied or revoked.

IX. The Licensing Specialist and Supervisor Roles in the Hearing

A. When attending the hearing:

1. Know and understand the case
2. Be familiar with the OAC rules and/or ORC statute listed in the PAO.

B. When presenting testimony:

1. Listen carefully to the questions asked and think before responding.
2. Answer only the questions asked. Do not volunteer any information.
3. Be concise and factual.
4. Do not guess at an answer, "I don't know" is an acceptable response.
5. If you do not understand a question, state, "I do not understand the question."
6. Speak clearly and distinctly. Do not use slang or professional jargon.
7. Do not use nods, gestures, or other nonverbal signals or responses.
8. Be professional, polite, and non-argumentative.

X. Foster Home Enforcement (Denial of Initial Certification, Denial of Recertification or Revocation)

- A. An agency which recommends the certification of foster homes may make a recommendation or ODJFS may unilaterally initiate action to deny initial certification, recertification or revoke a foster home certificate as a result of foster caregiver noncompliance with applicable OAC rules related to:
 1. The initial foster home homestudy process.

2. The foster home recertification assessment.
 3. The investigation of any complaint regarding the foster home.
 4. The result of announced or unannounced inspections.
- B.** Every enforcement action must have its basis in rule noncompliance, but not every rule noncompliance will result in an enforcement action.
- C.** Enforcement questions should be directed to the enforcement coordinator.
- D.** There are two principles involved in any enforcement action:
1. When a recommendation is made by a PCSA, PCPA, or PNA it is the agency's responsibility to obtain all documentation, evidence, and witnesses required to support the enforcement action.
 2. It is ODJFS' decision whether to proceed with a denial or revocation
- E.** The enforcement action for foster parent certification is similar to agency enforcement:
1. A PAO is drafted and sent to Legal Services with documentation.
 2. The signed PAO is returned to the enforcement coordinator for mailing.
 3. If a hearing is requested Enforcement meets with an Assistant Attorney General to prepare.
 4. If a hearing is not requested Enforcement will draft an AO and mail it to the agency after it has been signed.

I. Purpose

The purpose of a policy, plan and/or training proposal review is to determine compliance with OAC rules.

II. Policy Revisions/Recruitment Plans/Training Proposals

A. When agencies submit revised policies, recruitment plans and or training proposals, the licensing specialist shall review for compliance with OAC rules unless otherwise directed. The review must be completed using the appropriate section of the Appendix MM, Recruitment Plan Review Tool, or the Training Proposal/Checklist, as appropriate. When an agency submits a policy that relates to their certified function, but is not a policy required by OAC, the specialist will review the policy to ensure it does not contain any language that conflicts with OAC standards or requirements. Reviews should be completed by the specialist within 30 calendar days.

B. If the policies/training proposals/recruitment plans are returned to the agency for revisions, the relevant review tool is sent to the agency with the disapproval letter. These documents are then attached to the study together with the disapproved policy/plan(s). See OFCL User Documentation for instructions on grouping and attaching documents. The study remains open until the revisions are received, reviewed, and approved, and all documentation is added to the study. In the event that an agency submits multiple policy documents sporadically while a study is open, the additional policies are included with that study.

NOTE: *When a PCSA submits a foster care recruitment plan, the specialist will review the plan using the Recruitment Plan Review Tool and approve or return for rework in SACWIS.*

NOTE: *When a recruitment plan is approved, the Appendix X-1 shall be drafted and added to the study for signature by the Deputy Director.*

C. Upon final approval of policies/training plans, the licensing specialist shall submit the study to the licensing supervisor for review. The supervisor shall review for

compliance and either return the study to the specialist for revision or process the study within 5 working days of receipt.

III. Compilation of Review

- A. The following documents will be clearly labeled and attached to the OFCL study (Refer to the OFCL Attachment Categories and Types Document for instructions on attaching documents)
1. Policies:
 - a. Policy Handbook, all policies
 - b. Specified Policies
 - c. Miscellaneous – Appendix MM, Recruitment Plan Review Tool or Training Plan can be uploaded here
 - d. Returned Items
 2. Plans:
 - a. Adoption Recruitment Plan
 - b. Foster Caregiver Recruitment Plan
 - c. Training Proposal Plan
 3. Other: All correspondence with the agency is to be included. All Correspondence shall be clearly labeled in OFCL and attached to the OFCL report.
 - a. Email
 - b. Fax
 - c. Letter – including approval and disapproval letters
 - d. Scan
 - e. Miscellaneous

1. Correspondence including approval and disapproval letters.
2. Policy Statements, Plans, and Other Documents for the specific functions the agency is certified as listed on the current *Appendix MM*. All applicable policies, plans (except Recruitment plans submitted via SACWIS) and statements must be clearly labeled in OFCL and attached to the OFCL study. Refer to the OFCL User Documentation for instructions on attaching documents

I. Purpose Record Retention and Communication Procedures

- A. The purpose of the communication procedures is to identify the procedures and protocol regarding communication with parties both inside and outside of ODJFS regarding the certification process. The purpose of the record retention procedure is to specify the location, access, and retention of records that document the activities required for the certification process.

II. Professionalism in Communication

- A. The licensing specialist should ensure that professionalism in all types of communication, including letters, emails, verbal conversations, etc. is always maintained .
 - 1. Correct grammar, punctuation, and spelling should be reviewed on all written documents, prior to disbursing or attaching to the study. Personal comments and opinions are unprofessional and should not be included in any correspondence.
 - 2. As a representative of ODJFS, all conversations with agency personnel should be professional, polite; courteous and factual. Use of profanity is prohibited as well.
 - 3. As a rule, the licensing specialist should keep in mind, that all correspondence is a public record and may be published in some manner for public consumption, e.g. news media or the internet.

III. General Public Inquiries

- A. Occasionally, members of the public may contact the field office requesting information about a particular agency. The licensing specialist may answer general questions concerning an agency, which may include:
 - 1. An agency's licensure status and effective dates (temporary, two-year)
 - 2. The certified functions an agency is approved to operate
 - 3. The number, allegation(s), and findings of complaints received against an agency.
- B. Pursuant to Internal Policies and Procedures (IPP) 8101. Request for Public Records, upon receipt of an oral/written request for public records from the public, the licensing specialist shall forward the request to the licensing supervisor or bureau chief. They will forward the request to the next appropriate entity.

- C. If the licensing specialist receives an email or phone call from the central office concerning information regarding a general public records request, the specialist shall refer that person to their supervisor. The licensing supervisor shall serve as the main point of contact with central office.
- D. If a constituent or the person making a complaint calls requesting the disposition of the complaint, the licensing specialist can verbally release this information. All other information requests from the individual must be referred per this chapter.

IV. Media Contacts

- A. Occasionally, members of the media may contact the field office requesting information about an agency. Pursuant to Internal Policies and Procedures (IPP) 11001 - *Office of Communications Responsibilities*, it is the responsibility of the ODJFS office receiving the request(s) to advise the Office of Communications so that the call/request can be handled appropriately.
- B. Upon receipt of an oral/written request for public records or information concerning an agency from the media, the licensing specialist shall forward the request to the licensing supervisor or bureau chief. They will forward the request to the next appropriate entity.
- C. If the licensing specialist receives an email or phone call from central office concerning information regarding a media public records request, the specialist shall refer that person or the request to their supervisor. The licensing supervisor shall serve as the main point of contact with central office.

V. Record Retention

- A. Pursuant to IPP.4501 – *ODJFS Records Management*, a record is any document, device, or item, regardless of physical form or characteristic, created or received by or coming under the jurisdiction of any public office of the state or its political subdivisions, which serves to document the organization, functions, policies, decisions, procedures, operations, or other activities of the office.
- B. All public and private agency licensing records maintained in central office and at the field offices shall contain the following:
 - 1. Information required by the Foster Care Licensing Bureau’s Procedures Manual;

2. All letters must be documented on letterhead with the licensing specialist's signature, licensing supervisor's signature, bureau chief's signature, or OFC deputy director's signature, as applicable;
 3. Professional e-mails sent and/or received by public and private agencies; and
 4. Documentation providing proof of relevant issues during an initial review, recertification review, PCSA Review, additional visit review, or complaint investigation.
- C. Public and private agency licensing records maintained in central office and at the field office shall not contain the following:
1. Any handwritten notes
 2. Any post -it notes
 3. Conversational emails sent or received from agencies
 4. Emails containing information that is already documented within the review study
 5. Duplicate emails or faxes
 6. Draft forms or letters (excluding Issuance letters and all PCSA letters)
 7. Any policies, documents and letters with handwritten notes on them
- D. Field Office (Working) Files - The licensing specialist shall have available a copy of records (public and private agency licensing) for the most recent two-year certification period in OFCL and/or at the field office.
- E. Central office shall maintain the original record in OFCL (public and private agency licensing) for two certification periods. After the end of the period, the records shall be removed from OFCL unless there are any unresolved issues/discrepancies pertaining to an agency and a recent state audit (recertification of an agency) has been completed and released. Pursuant to the records retention schedule, the original record (public and private agency licensing) shall be disposed after four years unless there are any unresolved issues/discrepancies pertaining to an agency and a recent state audit (recertification of an agency) has been completed and released. As of May 2009, OFCL is the official record.

- F.** Central office shall maintain a copy of all foster home care licensing records for a period of four years. After the four-year period, the records shall be forwarded to the records center unless there are any unresolved issues/discrepancies pertaining to a foster home license. Pursuant to the records retention schedule, the foster home care licensing records shall be disposed unless there are any unresolved issues/discrepancies pertaining to a foster home license.

- G.** Electronic mail is another format for disbursing and maintaining records, and, for most purposes, is not treated differently than paper records. E-mail is subject to Ohio's records retention laws and need to be managed with care. Most of the agency's records, including email are open to public inspection whether they are maintained electronically or on paper. The informational content determines whether it is subject to records retention and/or public records requirements, not how the message is delivered. Again, additional information is available via IPP 8101. *Request for Public Records* as well as the summary of ODJFS E-mail records management available at the following website: <http://innerweb.odjfs.state.oh.us>. For a description of the emails to attach to a study, refer to the *OFCL User Documentation Manual*.

NOTE: Effective May 1, 2010, initial certifications cannot request waivers or variances.

I. Waivers

A. OAC rule 5101:2-1-01 defines a “waiver” as a discretionary action of ODJFS to temporarily suspend, pursuant to rule 5101:2-5-18 of the Administrative Code, all or part of a rule imposed on an agency by the application of Chapter 5101:2-5 or 5101:2-9 of the Administrative Code, or on a foster caregiver by the application of Chapter 5101:2-7 of the Administrative Code in order to give the agency or foster caregiver time to come into compliance.

1. It is the expectation of ODJFS that the agency or caregiver will achieve compliance.
2. There is no timeframe specified in rule regarding the length of time for which a waiver may be granted except that it may not exceed the expiration date of the current certificate.
3. The refusal of ODJFS to grant a waiver, in whole or in part is final and does not create any rights to a hearing under Chapter 119 of the Ohio Revised Code (ORC).
4. All waiver requests shall be considered on a case-by-case basis. The approval of a waiver does not constitute precedence for the approval of any other waiver request or the renewal of an existing waiver.

B. Waivers will only be considered for the following:

1. A waiver of the seventy-two consecutive hour limitation for a children’s crisis care facility to provide residential care to a preteen placed in the facility by a public children services agency (PCSA) or private child placing agency (PCPA). The waiver may authorize the certified children’s crisis care facility to provide residential care to the preteen for up to fourteen consecutive days.
2. Relative foster homes when the request is for a non-safety issue.
3. A private, non-profit therapeutic wilderness camp (PNTWC).

- C. A waiver request may be submitted at any time during the agency's certification period. The agency must submit a JFS 01376 *Waiver Request for Agency Rules, CRCs and Group Homes* to the assigned licensing specialist. A waiver request shall be considered timely if the JFS 01376 is received prior to the occurrence of any noncompliance.
- D. The licensing specialist will date stamp the request upon receipt if not received electronically or faxed. The specialist will open a study in OFCL, as a waiver study type. The specialist per the OFCL User Documentation recommendation should track the creation of a new study in OFCL.
- E. The request is attached to the study. The licensing specialist will review the request within **10 working days** of receipt, the request for additional information shall occur within **15 working days** of receipt, and if necessary, contact the agency for more information. The specialist may also return the waiver request to the agency if further clarification is needed. An on-site visit may occur at the discretion of the specialist or at the direction of the licensing supervisor.
- F. If no additional information is requested from the agency and the licensing specialist is satisfied with the waiver request, the specialist will make a recommendation to approve or deny the waiver request and will complete the waiver e-form in OFCL. The recommendation of approval or denial of the waiver shall be documented on the e-form *Agency Waiver Recommendation* form. The specialist will submit the study within **5 working days** of completing the form.
- G. The licensing supervisor will review the study, including the *Agency Waiver Recommendation* e-form and supporting documentation. The supervisor will make a recommendation to approve or deny the waiver on the e-form. The supervisor will download and scan (if applicable) the necessary documents (i.e. agency's request, supervisor and licensing specialist's recommendation), then forward such documents to the Policy area through email within **5 working days** of receipt. The supervisor will document in OFCL the date the material was forwarded to the policy area. The study will return to the specialist. The study will remain open, in the in-basket until a decision has been rendered and all documentation has been uploaded.
- H. The Child Welfare Policy Section will be responsible for reviewing the recommendations and approving/denying all waiver requests. The Child Welfare Policy Section shall complete and forward a cover letter and a copy of the Agency Waiver Recommendation e-form to the agency requesting the waiver. The Policy area will document the approval or disapproval of the request on the waiver form, sign and email the scanned PDF version directly to the licensing specialist. The specialist will upload the decision into OFCL and process the study as appropriate.

- I. The licensing specialist must ensure that all waiver recommendations received during any review are submitted separately to the licensing supervisor (a copy of the Agency Waiver Recommendation e-form and the recommendation must be contained within the respective study).
- J. If the denial of the waiver creates noncompliance on the part of the agency, then the licensing specialist must contact the agency regarding appropriate corrective action upon receipt of the denial. The corrective action plan associated with the denial should be attached to the waiver study prior to processing the study.
- K. The Child Welfare Policy Section will maintain a log of all waiver request received. The log will be updated when requests are received by the Policy Developer. The log will be located on the Q drive under Foster Care Licensing's shared drive.

II. Variances:

- A. OAC rule 5101:2-1-01 defines a "variance", as a discretionary action of ODJFS to permanently suspend all or part of a rule imposed on an agency by the application of Chapter 5101:5101:2-5 or 2-9 of the Administrative Code, or on a foster caregiver by the application of Chapter 5101:2-7 of the Administrative Code.
- B. Effective October 1, 2011, no variances shall be approved.
- C. Variance requests that have been approved prior to October 1, 2011 will remain in effect until the terms or conditions of a variance are violated or otherwise become nullified by a situation or by a change in the applicable Administrative Code rule. If the variance is nullified, it shall be rescinded.
- D. It is the agency's responsibility to maintain documentation of all approved variances.
- E. ODJFS has sole discretion in the rescission of a variance. The rescission of a variance does not create any rights to a hearing under Chapter 119 of the ORC.

I. Purpose:

- A. The main purpose of teaming is to promote consistency, efficiency, and accuracy among licensing specialists across the regional offices in the performance of required licensing activities. Licensing reviews that one specialist cannot efficiently or effectively complete (e.g. large or complex agencies) are a prime example of reviews where using the team approach would be appropriate.

NOTE: Participation in a review by a new staff member in training is not considered teaming, and therefore the procedures outlined below do not apply in that scenario. New staff in training will instead seek guidance from their supervisor regarding their role in each review.

II. Team Leader Responsibilities

- A. The team leader is the assigned licensing specialist for the Agency. (If the assigned specialist has delegated the review to another specialist, the delegated specialist is then the team leader. In this scenario, the assigned specialist and the team leader will confer to make determination on the exit process.)
- B. If the team members include licensing staff from another regional office, the team leader must contact a licensing supervisor and request that the team members be provided access to the case in OFCL prior to the initiation of the onsite review.
- C. The team leader shall provide information to all team members concerning all *summary of findings, summary of technical assistance, and corrective action* during the certification period to include all complaint/rule violation investigations.
- D. The team leader shall identify the roles and tasks of each team member.
- E. The team leader shall identify to the team members the universe period if applicable.
- F. The team leader will conduct a brief meeting, in person or via phone, with team members prior to the agency reconciliation meetings to review potential findings and discuss any other areas of concern or conflicts.

III. Team Member Responsibilities

- A. A licensing specialist should notify their supervisor prior to making a commitment to team a visit located in different unit.

- B. Team members must review the previous Summary of Findings of Noncompliance and approved corrective action plans in order to be prepared to assess compliance with the previous corrective action plans. These documents can be found by searching OFCL.
- C. It is the team member's responsibility to reconcile the results of the record reviews, onsite reviews, and interviews with residents or staff with the agency staff prior to the completion of their onsite teaming responsibilities. If the licensing specialist is unable to meet this requirement, they will confer with the team leader to provide a brief overview of potential areas of non-compliance or areas of concern.
- D. It is the responsibility of the team member to upload all individual e-forms that team member reviewed into the case study in OFCL. It is important that the case study report reflect accurate information and identify all team members and their role in the review.

IV. Conflict Resolution Procedures Regarding Rule Citations

- A. Prior to meeting with agency staff to reconcile the records or discuss the results of the onsite review/interviews, team members must review the areas of noncompliance with the team leader. Licensing specialists should never argue or disagree with another specialist regarding a rule citation during the reconciliation meeting with agency staff. The discussion with team members prior to the reconciliation meetings will help clarify any areas of conflict and allow for resolution prior to the meetings.
- B. If a conflict arises during the reconciliation or discussion with agency staff, the team member is to document the issue and discuss it with the team leader. The team members may inform the agency that clarification is needed and advise the agency that a resolution will be provided at or before the exit conference.
- C. Team members are not to comment on or engage in a discussion with the agency staff on the findings of a previous licensing specialist. The previous findings have been issued and a corrective action plan is in place. The findings are considered a valid assessment at the time of the previous review. The role of the team member is to conduct a licensing review and issue findings based on the rule requirements and the agency information reviewed during the current review only.
- D. If there is disagreement on findings or rule interpretation, the team leader's licensing supervisor or another district office licensing supervisor shall be consulted.

1. Additional Visit -- Onsite review of an agency during points in time throughout the certification period to assess compliance with OAC rules.
2. Agency -- an entity seeking certification or currently certified to operate certain functions required by law or rule.
3. Appeal -- Due process right afforded to an agency regarding any findings of noncompliance.
4. Application – Process of completing a form (JFS 1290, JFS 1691) required by law or rule to become certified by ODJFS.
5. Articles of Incorporation -- A set of formal documents filed with a government body to legally document the creation of a corporation. Articles of incorporation must contain pertinent information such as the firm's name, street address, agent for service of process, and the amount and type of stock to be issued.
6. Audit (AICPA) -- an official inspection of an individual's or organization's accounts, typically by an independent body.
7. BFCL – Bureau of Foster Care Licensing
8. BCII – Bureau of Criminal Investigation-Ohio Attorney General, also refers a criminal record check completed per law or rule.
9. Building Approval – certificate of occupancy that is issued by a jurisdiction.
10. CCCF (Children’s Crisis Care Facility) – facility that has as its primary purpose the provision of residential and other care to children that meet the following: a pre-teen placed by the parent, caretaker, PCSA, or PCPA for emergency temporary care.
11. Certification -- the confirmation of certain characteristics of an object, person, or organization. This confirmation is often, but not always, provided by some form of external review, education, assessment, or audit. (used synonymously with License)
12. Certified Email – sending a secure email that requires a return receipt to assure it was received.
13. Citation -- a summons.
14. Child Abuse/Nelgect (CA/N) – intentional or unintentional harm that is caused to a child, defined in law. (ORC 2151)
15. Commission -- words or overt actions that cause harm, potential harm, or threat of harm
16. Complaint – allegation an agency or foster home is violating rules or laws
17. Compliance -- cooperation or obedience to rules and law
18. CRC (Children’s Residential Center) – Residential facility requiring certification that holds 11 or more children.
19. CAP – Corrective action plan, a means to correct areas of noncompliance.
20. Direct Placement – An instance where a child is placed into a residential facility by a parent or custodian.
21. FBI – Federal Bureau of Investigation, Also refers to a criminal record check required by rule or law.
22. FCLPM – Foster Care Licensing Procedure Manual
23. Fire Inspection – JFS Form 1200 or another form approved by the state fire marshall completed annually by agencies for all foster homes, group homes, and residential centers.
24. Fiscal Year – The way in which an agency determines its fiscal calendar. Ex. State Fiscal Year is 7/1-6/30.

25. Food Service License – issued by local health departments to provide food service at a facility
26. Foster Home -- a private residence in which children are received apart from their parents, guardian, or legal custodian, by an individual reimbursed for providing the children non-secure care, supervision, or training twenty-four hours a day. "Foster home" does not include care provided for a child in the home of a person other than the child's parent, guardian, or legal custodian while the parent, guardian, or legal custodian is temporarily away. Family foster homes, pre-adoptive infant foster homes and specialized foster homes are types of foster homes.
27. Fraud/Falsification -- found to have furnished or made misleading or false statements or reports to the Ohio department of job and family services (ODJFS).
28. Group Home – any facility, public or private, that accepts a maximum of ten children, is not a certified foster home, and cares for children more than two weeks.
29. Health & Safety – refers to allegations or rule violations that could cause harm to a child and are serious in nature.
30. Incomplete Application – an application filed by an applicant, agency, or foster parent that is missing information required.
31. Incorrect Application – an application filed by an applicant, agency, or foster parent that is found to have inaccurate information.
32. Inquiry – the act of submitting information requested by ODJFS in an online survey to assure that the interested person would meet the criteria of functions certified by ODJFS.
33. Inspection (also known as Study, Review, Onsite) – the assessment of physical facilities and records for compliance with rule & law.
34. Investigation – activities which surround a complaint. May include inspection, interviews, &/or review of records
35. License – a document, valid for a two year period, that allows an agency to perform certain functions. Also a document, valid for a two year period, that permits a home to operate legally as a foster home.
36. MEPA – Multi-Ethnic Placement Act, reviews completed on a two year cycle at all public and some private agencies.
37. Non-compliance -- failure to conform to rules or standards.
38. OAC – Ohio Administrative Code
39. ODJFS – Ohio Department of Job & Family Services
40. OFC – Office of Families & Children (within ODJFS)
41. OFCL (also referred as FileNet) – Ohio Foster Care Licensing, the online database used to store foster care records/studies.
42. Omission -- a failure to do something, especially something that one has a moral or legal obligation to do
43. ORC – Ohio Revised Code
44. PCPA – Private Child Placing Agency. Any association, as defined in section 5103.02 of the Revised Code, certified pursuant to section 5103.03 of the Revised Code to accept temporary, permanent, or legal custody of children and place the children for either foster care or adoption.

45. PCSA – Public Children Services Agency. An entity specified in section 5153.02 of the Revised Code that has assumed the powers and duties of the children services function prescribed by Chapter 5153. of the Revised Code for a county.
46. PNA – Private Non-custodial Agency. Any person, organization, association, or society certified by ODJFS that does not accept temporary or permanent legal custody of children, that is privately operated in this state.
47. PNTWC – Private Non-custodial Therapeutic Wilderness Camp. A camp certified to operate by ODJFS that is private and receives no public funds, where parents or custodians can place children for up to a year and they spend the majority of their time outdoors.
48. RAPBACK – Retained Applicant Fingerprint Database Information Exchange
49. Ratio – the number of child care staff required at any one time to supervise groups of children at a facility.
50. Recertification – the process of an agency re-applying for continued certification and licensing staff conducting a review to assure compliance with rules and law.
51. Recruitment Plan -- identifies the agency's diligent recruitment efforts of parents and which reflects the diversity of waiting children for whom adoptive homes are needed. Agencies submit a recruitment plan to ODJFS for each upcoming state fiscal year by May first of each even numbered year.
52. Restraint -- Therapeutic holding technique(s) with the intent to minimize or prevent harm when the child has lost control of his or her actions in such a way as to threaten harm to self or others. Physical restraint shall not be used as a planned intervention until after other less restrictive procedures or measures have been explored and found to be inappropriate. At no time shall physical restraint be used as punishment or for staff convenience.
53. RPF (Residential Parenting Facility) – a type of facility where a minor parent resides with their child(ren). Must be a self-contained facility.
54. Self Report – an opportunity for an agency to inform ODJFS licensing of rule violations committed by the agency. May not require the opening of a complaint against the agency.
55. Serious Risk – Rules determined by ODJFS to be weighted and require a citation.
56. SOFN (Summary of Findings of Noncompliance) – written document produced by the licensing specialist that shows the areas of non-compliance during a review.
57. SOTA (Summary of Technical Assistance) – written document produced by the licensing specialist of areas that do not rise to the level of non-compliance but may require attention.
58. Technical Assistance – A type of review or an opportunity for an agency to receive assistance without citations and findings of non-compliance.
59. Training Plan -- A private child placing agency (PCPA), private noncustodial agency (PNA), or a consortium of such agencies that seeks to operate a preplacement training program or a continuing training program shall submit its training proposal(s) for approval to the agency's assigned Ohio department of job and family services (ODJFS) field office licensing specialist.
60. Universe Period – A period of time determined by ODJFS licensing staff that records will be selected.
61. 119 – An option written into law that an agency may be given an extension if ODJFS Licensing is unable to meet the timeframes to re-certify an agency. A letter and report must be completed by ODJFS.