

Ohio Department of Developmental Disabilities

Request for Proposal (RFP)

Training for Intermediate Care Facilities

Proposals must be received no later than **August 10, 2015**

This RFP will be posted on **July 24, 2015** to:
<http://procure.ohio.gov/proc/searchProcOpps.asp>

(Miscellaneous Commodities and Services)

For additional information, please contact:
Cathy Hutzel, Ohio Department of Developmental Disabilities
Division of Policy & Strategic Direction
(614)46.0129
Cathy.Hutzel@dodd.ohio.gov

OVERVIEW & MISSION

The Ohio Department of Developmental Disabilities (DODD) is responsible for overseeing a statewide system of services and supports for people with developmental disabilities and their families.

The mission of DODD is continuous improvement of the quality of life for Ohio's citizens with developmental disabilities and their families.

GUIDING PRINCIPLES

DODD will:

- Create less complex service delivery, with fair and logical payment systems that are federally compliant
- Continue to be good stewards of limited resources
- Provide quality outcomes through a combination of people and processes
- Design service delivery models in response to choices made by the people served, in alliance with community supports
- Develop a system-wide vision and long-range strategic plan by listening to our funding partners, constituents and stakeholders

I. BACKGROUND

Ohio has adopted Five Key Principles of Person-Centered Planning (attached), and is focusing efforts on ensuring these principles are adopted and utilized throughout our service delivery system – regardless of funding source or service location. To that end, Ohio has worked with stakeholders to develop a new proposed rule 5123:2-3-03 (currently in clearance and attached) requiring services and supports delivered in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICFs-IID) to be based on a person-centered plan. Ohio has also adopted an Employment First policy, whereby community employment is the desired outcome of services and should be addressed/considered in all person-centered plans, regardless of funding source (Executive Order and rule 5123:2-2-05 attached).

Ohio's system includes approximately 420 ICFs-IID serving approximately 5700 people. In addition, to the changes referenced above, DODD has worked with stakeholders to develop a rule regarding behavioral support strategies (Ohio Administrative Code 5123:2-2-06 attached) that applies to people receiving services in a variety of settings, including ICFs-IID, and also includes the concepts of person-centered planning. To further support ICFs-IID in utilizing person-centered planning and implementing these rules, DODD is seeking a contractor to develop training and other educational resources for the following audiences:

- Qualified intellectual disability professionals (QIDPs)
- Direct service professionals in ICFs-IID
- People receiving services in ICFs-IIDs, their family members and/or guardians

II. OBJECTIVES

The creation and implementation of regional in-person training curriculum to develop the skills and competencies of those responsible for developing, reviewing and implementing person-centered service plans, including those plans with restrictive measures and to raise the awareness of individuals and families relative to person-centered planning –the process, components, outcomes. The training should enable and foster the use of person-centered planning tools, including those tools that address employment and positive behavioral support strategies. This in-person curriculum will then be utilized by DODD to create on-line competency-based modules for the state.

III. SCOPE OF WORK AND DELIVERABLES

Duties of Contractor

- A. Contractor shall develop and implement content, materials and resources for in-person training. A draft of the curriculum and materials shall be available to DODD for its approval by October 18, 2015. This training must include, but is not limited to, the following:
- a) Person-Centered Planning in the ICF-IID:
 - i. Assessment (CFR42 CFR 483.440(c)(3))
 - ii. Individual Program Plan (IPP) (42 CFR 483.440(c)), which should include, but not be limited to:
 - a. Employment
 - b. Behavioral support strategies
 - 1. Positive support strategies
 - 2. Support strategies that include restrictive measures
 - 3. Discharge planning
 - 4. Offering opportunities for community participation
 - iii. Program Implementation (42 CFR 483.440(d))
 - iv. Program Documentation (42 CFR 483.440(e))
 - v. Program Monitoring and Change (42 CFR 483.440(f))
- B. Contractor shall provide a minimum of ten (10) one-day in-person training sessions in five (5) regions of the state at no cost to attendees.
- C. Contractor is responsible for securing all training locations and making necessary arrangements (i.e., needed technology, handouts, etc.) and coordinating with DODD registration and attendance for all sessions (utilizing DODD's registration software).
- D. A bidder is not limited to the following elements only, but the proposal should discuss :
- a) Detailed learning objectives for in-person trainings.
 - b) Plans for any printed materials that will be made available to attendees (beyond a copy of the presentation) such as sample behavioral plans, examples of positive strategies or other learning aids. Samples of materials are appreciated.
 - c) Plans for in-person training activities, opportunities for participant discussion, or training exercises that support the learning objectives identified.

- d) Plans to incorporate evaluation and feedback mechanisms to ensure that training efforts are on target.
 - e) Plans to make training accessible to a variety of audiences/learning styles/knowledge levels.
 - f) Proposed number of attendees at each session/during the contract year.
- E. It is anticipated that training will be conducted between November 1, 2015 and June 30, 2016.
- F. It is anticipated that the curriculum used for the in-person trainings will be utilized by DODD to create specific on-line modules. As a result, any curriculum, tools, etc. developed should be compatible with DODD's online learning management system and e-learning content editing tool, Articulate Storyline, this includes content created using PowerPoint 2010 or later and Windows Media Files.
- G. The content and materials for all trainings shall become the property of DODD including photographs or video content created by the contractor in support of this training content upon request, Contractor shall transfer content to DODD as electronic files. Content includes all presentations and handouts. Contractor must use DODD consent form for any pictures/video taken specifically for this material.

Duties of DODD

- A. DODD shall publicize the available training to all constituencies.
- B. DODD will make online content available and edit/maintain content.

Minimum Qualifications of Contractor

- A. The contractor must have significant experience working within the field of developmental disabilities. They must be able to demonstrate extensive experience in working in an ICF, extensive knowledge of ICF regulations and interpretive guidelines, and related federal regulations,
- B. Contractor must have experience in person-centered planning, including developing individual plans which contain a range of behavioral support strategies for persons with developmental disabilities.
- C. Contractor must have experience in developing and implementing behavioral support strategies with positive as well as restrictive measures.
- D. Contractor must have experience in developing and delivering training programs to a variety of audiences.

IV. TIMELINES

DODD's proposed schedule for reviewing proposals and project work is indicated below. The Department, in all cases, will determine the ultimate timing of events related to this procurement. Timelines are subject to change, upon notice, at the sole discretion of the State.

Stage	Deadline
Public Notice	July 24, 2015
Requests for Clarification due to DODD	August 3, 2015

Clarification from DODD due	August 7, 2015
Proposals due to DODD	August 10, 2015
Notification of Award	September 15, 2015
Start work date	September 18, 2015
In-Person Curriculum deliverables due to DODD	October 18, 2015

V. BIDDER INFORMATION

A. Requests for Clarification

Requests for clarification must be submitted electronically to Cathy Hutzel at Cathy.Hutzel@dodd.ohio.gov by 4:00pm, **August 3, 2015**. DODD will electronically respond to requests by 4:00pm, **August 7, 2015**.

VI. OTHER REQUIREMENTS

A. Communications Prohibited

From the issuance date of this RFP, until a contract is awarded to a bidder, there may not be communications concerning the RFP between any bidder who expects to submit a proposal and any employee of DODD involved in the issuing of the RFP or other state employee who is in any way involved in DODD's design and implementation of the Behavioral Support Strategies Training.

The only exceptions to this prohibition are communications provided through the submission of written requests for clarification/interpretation in accordance with Section III of this RFP.

B. Time Frame

1. Subject to approval by the State Controlling Board, the contract period will begin no sooner than **September 18, 2015** (actual date TBD), **and run through June 30, 2016**.
2. This project is expected to be completed according to the major milestones and deliverables outlined in Section III. Satisfactory completion of the deliverables will be determined by DODD.

C. Fee Schedule

The Contractor shall be compensated based on deliverables as outlined in Section III. The personal services contract between DODD and the selected bidder will further specify the timelines for completion of each deliverable & payment structure.

D. State Contracts

Proposals must list any current contracts the bidder has with State of Ohio agencies, boards or commissions. The list must indicate the purpose of the contract, the amount of the contract, the time period covered by the contract, and the percent of the project completed.

E. Interview

Firms or individuals submitting bids may be requested to participate in an interview as part of the evaluation process. DODD reserves the right to select from responding bidders for interviews and may not interview all bidders submitting proposals. The bidder shall bear the cost of travel to any scheduled interview.

F. Proposal Costs

Costs incurred in the preparation of this proposal and any subsequent contracts are to be borne by the bidder. DODD will not contribute in any way to the costs of preparation. Any costs associated with proposal review interviews will not be DODD's responsibility.

G. Proprietary Information

All proposals submitted shall become the property of DODD. All information submitted by the bidder will be considered to be public information unless the bidder specifically demonstrates, in writing, which information it considers to be proprietary. "Proprietary information" is information which, if made public, would put the bidder at a disadvantage in the market place and trade in which the bidder is a part. Consequently, any assertion of "proprietary" information must be clearly identified and the basis of the assertion must be included. It is not adequate for the bidder to simply state that disclosure of the information will put it at a disadvantage in the market place. DODD will make the final decision as to whether information is "public" or "proprietary."

H. Contractual Requirements

1. Any contracts resulting from the issuance of this RFP are subject to the terms and conditions as provided in the personal services contract. The information contained in the RFP and in the proposal submitted by the selected bidder shall be considered part of the enclosed contract.
2. Payments for any and all services provided pursuant to the contract are contingent upon the availability of state and federal funds.
3. All aspects of the contract apply equally to work performed by any and all subcontractors.
4. The contractor, and any subcontractor(s), will not use or disclose any information made available to them for any purpose other than to fulfill the contractual duties specified in the RFP. The contractor, and any subcontractor(s), agrees to be bound by the same standards of confidentiality, including federal and state statutory and regulatory requirements that apply to the employees of DODD and the State of Ohio.
5. As a condition of receiving a contract from DODD, the selected contractor and any subcontractor(s) shall certify compliance with any court order for the withholding of child support, which is issued pursuant to Section 3113.217 of the Ohio Revised Code. The contractor, and any subcontractor(s), must also agree to cooperate with DODD and any Ohio Child Support Enforcement Agency in ensuring that the contractor or employees of the contractor meet child support obligations established under state law.
6. As a condition of receiving a contract from DODD, the contractor and any subcontractor(s) shall certify compliance with Ohio Bureau of Worker's Compensation requirements by providing a current Worker's Compensation Certificate.

I. Travel Reimbursement

Travel cost should be encompassed within the cost of the deliverables. Travel is not to be listed separately. For purposes of this RFP, travel includes all modes of transportation (airfare, taxi, car rentals, etc.), lodging expenses, cost of communications by phone, mail, e-mail or fax and meals.

J. Minority Business Enterprise

DODD is required by Section 125.081(B) of the Ohio Revised Code to award fifteen percent (15%) of its procurement to vendors certified as a Minority Business Enterprise (MBE), pursuant to Section 123.151(B)(1) of the Ohio Revised Code. The bidder must indicate its MBE status in the proposal. If the vendor intends to subcontract with a certified MBE, a minimum of fifteen percent (15%) of the total contract price must be subcontracted. The proposal's transmittal letter must clearly indicate the MBE subcontractor the vendor intends to use as well as the services to be performed in order to comply with this specific work. Failure to comply with this requirement may result in disqualification of the proposal.

K. Ethical and Conflict of Interest Requirements

1. No contractor or individual, company or organization seeking a contract shall promise or give to any DODD employee any item of value that is of such character as to manifest a substantial and improper influence upon the employee with respect to his or her duties.
2. No contractor or individual, company, or organization seeking a contract shall solicit any DODD employee to violate any of the conduct requirements for employees.
3. Any contractor acting on behalf of DODD shall refrain from activities that could result in violations of ethics and/or conflicts of interest. Any contractor or potential contractor who violates the requirements and prohibitions defined here or of Section 102.03 or of Section 102.04 of the Ohio Revised Code is subject to termination of the contract or refusal by DODD to enter into a contract.

VII. PROPOSAL FORMAT AND SUBMISSION

A. Proposal Submission

1. The proposal must be prepared in accordance with instructions in this section.
2. The proposal is to be prepared in a manner that clearly outlines how each of the deliverables in Section III will be completed within the time frames specified in that same section.
3. Proposals must either be emailed or mailed to the following individual by August 10, 2015:

Cathy Hutzel
Division of Policy & Strategic Direction
Ohio Department of Developmental Disabilities
30 E Broad St, 12th Floor
Columbus, Ohio 43215
614.466.0129
Cathy.Hutzel@dodd.ohio.gov

B. Proposal Format

To be accepted, a proposal must include: a Technical Proposal and a Cost Proposal as described in this section, contain all the information specified for each of the categories listed in this section, and meet the requirements of this section.

1. Technical Proposal

- a. Transmittal Letter. The Technical Proposal must include:
 - i. A transmittal letter that identifies the bidder;
 - ii. The name, title, address, and telephone number of the bidder's contact person with authority to answer questions concerning the RFP; and
 - iii. The name, title, address, and telephone number and e-mail address of the bidder's contact person with authority to address contractual issues, including a person with the authority to execute a contract on behalf of the bidder.

- b. Organizational Experience. The bidder must include:
 - i. Information on the background of the firm or individual, including background information of any subcontractor(s);
 - ii. Any prior experience relevant to this RFP (including current contact names and phone numbers for these references), and a list of similar projects currently underway by the firm, individual or by any subcontractor(s) as well as completed over the past five (5) years. The Evaluation/Selection Review committee will consider these additional references and may contact each of these sources.

- c. Technical Approach and Work Plan. The Technical Proposal must indicate how the bidder plans to address the purpose, objectives and deliverables, within the timeframes as stated in this RFP. The proposal must outline the following in detail:
 - i. Development of the curriculum (including sources of expertise, methods of obtaining immediate feedback, and instructional objectives);
 - ii. How the bidder plans to address each of the audiences identified in Section I;
 - iii. Samples of previous training, including but not limited to: curriculum, tools or handouts distributed during in-person trainings;
 - iv. The project staffing, including any subcontractors;
 - v. A Table of Organization for the project;
 - vi. A chart indicating the names of staff and staff hours or activities/tasks linked to the responsibility of each of those individuals involved in each deliverable of the project;
 - vii. A procedure for reporting the status of the project, including work completed;
 - viii. A proposal for how coordination will occur and how information will be shared with DODD; and
 - ix. A proposed procedure to address and resolve unanticipated problems during the course of the project, specifying that the procedure will not adversely affect the timelines associated with the project.

- d. Personnel Qualifications
 - i. The Technical Proposal must include the names, resumes, education, and experience of personnel listed in the Table of Organization/personnel chart for this project (including any subcontractors), and fully explain how their education and experience is relevant to the areas described in Sections I, II and III of this RFP.

- ii. DODD shall require a clause in the resulting contract regarding key personnel that any person identified as critical to the success of the project may not be removed without reasonable notice to DODD.
- iii. One Project Manager shall be named on behalf of the bidder. All correspondence shall be directed through this named individual.

2. Cost Proposal

The Cost Proposal must indicate the total cost for the project for state fiscal year 2016 and the following elements:

- Cost of developing in-person curriculum;
- Cost of arranging/delivering ten (10) sessions of the in-person curriculum.

VIII. CRITERIA FOR PROPOSAL EVALUATION AND SELECTION

All proposals will be reviewed and scored by a Proposal Review Committee, comprised of staff from DODD. The Proposal Review Committee shall include a representative from at least two Divisions of DODD. Any proposals not meeting the requirements contained in this RFP will not be scored.

A maximum of 100 points will be awarded for the Proposal, as outlined in this section.

IX. EVALUATION OF PROPOSAL – POINT SYSTEM

25	The bidder’s proposal clearly outlines the method and timelines for achieving each of the deliverables, including methods of achieving learning objectives with each audience.
10	The costs associated with this proposal are reasonable and commensurate with the services provided.
10	The bidder’s proposal includes procedures for: communication throughout the contract period; resolving unanticipated problems; and status updates to the DODD (format and mode) as stated in the RFP.
30	The bidder’s proposal reflects the project staffing and demonstrates the competence, knowledge, and qualifications of employees and subcontractors as outlined in the RFP related to ICFs-IIDs and person-centered planning, including employment and behavioral support strategies.
25	The bidder’s proposal reflects the project staffing and demonstrates the competence, knowledge and qualifications of employees and subcontractors as outlined in the RFP related to development and delivery of in-person training.

Person-Centered Planning

Recently, the Centers for Medicare and Medicaid Services (CMS) placed in rule that person-centered planning will take place for persons who receive Developmental Disability (DD) services funded by waivers. The Ohio Department of Developmental Disabilities (DODD) also has increased its focus on person-centered planning principles for everyone we serve, and the importance of the individual receiving services as the leader of the team.

Recognizing that a number of practices and methodologies for person-centered planning exist, as well as many reliable methods for creating person-centered plans, DODD has chosen not to subscribe to any one approach to the exclusion of any other. Instead, the Department advocates for incorporating fundamental principles shared by many person-centered approaches.

DODD's Person-Centered philosophy is grounded in the following principles:

- 1. Beginning with a comprehensive understanding of the person is essential.**
A thorough knowledge about the person receiving services – their unique history and experiences, their likes and dislikes, their risks and concerns, their interests and culture, and their strengths, talents and goals – is essential to planning supports.
- 2. Empowering informed choices increases independence.**
Increasing opportunities for decision making in small everyday matters and life-defining matters encourages self-expression, self-determination, advocacy, and independence.
- 3. Involving trusted supports increases opportunities for success.**
Having a valued place in a network of personal relationships that includes close friends promotes physical and emotional well-being.
- 4. Enhancing natural supports increases community membership.**
Expanding community engagement and employment opportunities that promote involvement in meaningful and fulfilling activities enhances a person's network of personal relationships and their role in their community.
- 5. Ensuring plans and services are driven by the person is vital.**
Developing a plan starts with the person receiving services – what is important to them and for them – and involves others chosen by that individual to aid in informed decision-making.

***** Proposed New Rule - June 26, 2015 *****

5123:2-3-03 Licensed residential facilities - person-centered planning

(A) Purpose

This rule establishes standards to ensure that services for individuals residing in residential facilities licensed in accordance with section 5123.19 of the Revised Code are delivered in accordance with an individual plan or individual service plan that is developed through person-centered planning.

(B) Definitions

- (1) "Home and community-based services" has the same meaning as in section 5123.01 of the Revised Code.
- (2) "Individual" means a person with a developmental disability.
- (3) "Individual plan" or "individual service plan" means the written description of services, supports, and activities to be provided to an individual.
- (4) "Informed consent" means a documented written agreement to allow a proposed action, treatment, or service after full disclosure provided in a manner the individual or his or her guardian understands, of the relevant facts necessary to make the decision. Relevant facts include the risks and benefits of the action, treatment, or service; the risks and benefits of the alternatives to the action, treatment, or service; and the right to refuse the action, treatment, or service. The individual or his or her guardian, as applicable, may revoke informed consent at any time.
- (5) "Intermediate care facility for individuals with intellectual disabilities" has the same meaning as in section 5124.01 of the Revised Code.
- (6) "Person-centered planning" means an ongoing process directed by an individual and others chosen by the individual to identify the individual's unique strengths, interests, abilities, preferences, resources, and desired outcomes as they relate to the individual's support needs.
- (7) "Qualified intellectual disability professional" has the same meaning as in 42 C.F.R. 483.430 as in effect on the effective date of this rule.
- (8) "Service and support administrator" means a person, regardless of title, employed by or under contract with a county board of developmental disabilities to perform the functions of service and support administration and who holds the appropriate certification in accordance with rule 5123:2-5-02 of the Administrative Code.

***** Proposed New Rule - June 26, 2015 *****

- (9) "Team," as applicable, has the same meaning as in rule 5123:2-1-11 of the Administrative Code or means an interdisciplinary team as that term is used in 42 C.F.R. 483.440 as in effect on the effective date of this rule.

(C) Decision-making responsibility

- (1) Individuals, including individuals who have been adjudicated incompetent pursuant to Chapter 2111. of the Revised Code, have the right to participate in decisions that affect their lives and to have their needs, desires, and preferences considered.
- (2) An individual for whom a guardian has not been appointed shall make decisions regarding receipt of a service or support or participation in a program provided for or funded under Chapter 5123. or 5126. of the Revised Code. The individual may obtain support and guidance from another person; doing so does not affect the right of the individual to make decisions.
- (3) An individual for whom a guardian has not been appointed may, in accordance with section 5126.043 of the Revised Code, authorize an adult (which may be referred to as a "chosen representative") to make a decision described in paragraph (C)(2) of this rule on behalf of the individual as long as the adult does not have a financial interest in the decision. The authorization shall be made in writing.
- (4) When a guardian has been appointed for an individual, the guardian shall make a decision described in paragraph (C)(2) of this rule on behalf of the individual within the scope of the guardian's authority. This paragraph shall not be construed to require appointment of a guardian.
- (5) An adult or guardian who makes a decision pursuant to paragraph (C)(3) or (C)(4) of this rule shall make a decision that is in the best interest of the individual on whose behalf the decision is made and that is consistent with the individual's needs, desires, and preferences.

(D) Development of individual plans and individual service plans

- (1) Person-centered planning shall be the foundation for development of individual plans and individual service plans.
- (2) Individual service plans for individuals who reside in licensed residential facilities other than intermediate care facilities for individuals with intellectual disabilities shall be developed with the individual by a service and support administrator in accordance with rule 5123:2-1-11 of the Administrative Code.
- (3) Individual plans for individuals who reside in intermediate care facilities for individuals with intellectual disabilities shall be developed in accordance with paragraph (E) of this rule.

***** Proposed New Rule - June 26, 2015 *****

- (E) Requirements for development of individual plans for individuals who reside in intermediate care facilities for individuals with intellectual disabilities
- (1) What is important to the individual and what is important for the individual as expressed directly by the individual, and as applicable, by an adult authorized by the individual or the individual's guardian shall drive development of the individual plan.
 - (2) The services, supports, and activities described in the individual plan shall reflect what is important to the individual and what is important for the individual, meet the individual's needs, provide opportunities for the individual to interact with persons without disabilities in integrated community settings, and assist the individual in expanding and developing skills that will lead to a more independent, secure, and enjoyable life.
 - (3) Evaluations shall be used as a resource to identify appropriate methods of developing the services, supports, and activities necessary to meet the needs of the individual.
 - (a) Evaluations of the individual shall include at a minimum the following which shall be conducted as needed and at least annually:
 - (i) A general health evaluation including vision, hearing, and screenings appropriate for the individual's age and gender.
 - (ii) An evaluation of the individual's general dental health and hygiene.
 - (iii) An adaptive behavior or independent living skills assessment.
 - (b) The individual's social history shall be reviewed at least annually and updated as needed.
 - (c) If the results from the evaluations described in paragraphs (E)(3)(a) and (E)(3)(b) of this rule are insufficient to identify appropriate methods of developing the services, supports, and activities necessary to meet the needs of the individual, additional evaluations shall be obtained.
 - (4) The qualified intellectual disability professional shall perform and document the following:
 - (a) Coordinate development of the individual plan with the individual and the team within thirty days after the individual's admission to the residential facility and at least annually thereafter.
 - (b) Describe, annually and upon request, the supports and services available to an individual residing in an intermediate care facility for individuals with intellectual disabilities and the supports and services available to an individual enrolled in a home and community-based services waiver.

***** Proposed New Rule - June 26, 2015 *****

- (c) Ensure that development of the initial individual plan and each subsequent individual plan reflects meaningful planning for:
 - (i) The individual's discharge from the intermediate care facility for individuals with intellectual disabilities that:
 - (a) Identifies supports and services necessary for the individual's successful transition to an integrated community setting and specifies who is responsible for ensuring necessary supports and services are provided; and
 - (b) Includes strategies or methods for eliminating or overcoming barriers preventing the individual from transitioning to an integrated community setting.
 - (ii) The individual's unique strengths, interests, abilities, preferences, resources, and desired outcomes as they relate to community employment in accordance with paragraph (D) of rule 5123:2-2-05 of the Administrative Code.
 - (d) Review the individual plan as needed or upon request.
 - (e) Review implementation of the individual plan at least quarterly and revise as needed.
 - (f) Coordinate the services, supports, and activities being provided to the individual with service providers, as identified in the individual plan.
 - (g) Contact the county board when an individual residing in the intermediate care facility for individuals with intellectual disabilities requests, or a person on the individual's behalf requests pursuant to paragraph (C) of this rule, assistance to move from the intermediate care facility for individuals with intellectual disabilities to a community setting.
- (5) The qualified intellectual disability professional shall secure informed consent for the individual plan from the individual, adult authorized by the individual, or the guardian, as applicable.
- (6) The qualified intellectual disability professional shall attempt to address concerns when informed consent is refused or revoked by presenting alternative services or activities to the individual.
- (7) The individual plan shall be provided to the individual, adult authorized by the individual, or individual's guardian, as applicable; to all parties responsible for implementation of the individual plan; and to authorized regulatory agents. The individual plan shall not be released to other persons without the informed consent of the individual, adult authorized by the individual, or individual's guardian, as applicable.

(E) Requirements for county boards

- (1) The county board shall adopt and implement a local policy to implement the employment first policy which clearly identifies community employment as the desired outcome for every individual of working age.
- (2) In its strategic plan, the county board shall outline and periodically update its strategy and benchmarks for increasing the number of individuals of working age engaged in community employment services.
- (3) The county board shall collaborate with workforce development agencies, vocational rehabilitation agencies, and mental health agencies in the county to support individuals to obtain community employment.
- (4) The county board shall collaborate with school districts in the county to ensure a framework exists for individuals approaching completion of a program or service under Chapter 3323, of the Revised Code such that the county board and school districts in the county use similar methods to support students with developmental disabilities to obtain community employment. Through this collaboration, the county board shall identify and attempt to resolve any duplication of efforts.
- (5) The county board shall disseminate information to individuals served, families, schools, community partners, employers, and providers of services about resources and opportunities, including medicaid buy-in and other work incentive programs, that facilitate community employment.
- (6) The county board shall collect and submit to the department individual-specific data regarding the cost of non-medicaid employment services, employment outcomes for individuals who receive non-medicaid employment services, and employment outcomes for individuals who do not receive paid employment services but who are engaged in competitive employment or community employment.

(F) Requirements for providers

- (1) Providers of employment services shall submit to each individual's team at least once every twelve months, or more frequently as decided upon by the team, a written progress report that demonstrates that services provided are consistent with the individual's identified community employment outcome and that the individual receiving services has obtained community employment or is advancing on the path to community employment. The progress report for each individual participating in prevocational services shall describe progress on achievement of desired outcomes as set forth in the individual plan or individual service plan, as applicable.

5123:2-2-05

Employment first.(A) Purpose

The purpose of this rule is to implement the employment first policy in accordance with section 5123.022 of the Revised Code.

(B) Scope

This rule applies to county boards of developmental disabilities and providers responsible for planning, coordinating, or providing employment services, regardless of funding source, to individuals with developmental disabilities.

(C) Definitions

- (1) "Benefits analysis" means information provided to individuals about the impact of work on public assistance programs including but not limited to, social security disability insurance, supplemental security income, medicaid/medicare coverage, medicaid buy-in for workers with disabilities, veteran's benefits, housing assistance, and food stamps.
- (2) "Community employment" means competitive employment that takes place in an integrated setting.
- (3) "Competitive employment" means full-time or part-time work in the competitive labor market in which payment is at or above the minimum wage and not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by persons who do not have disabilities.
- (4) "County board" means a county board of developmental disabilities.
- (5) "Department" means the Ohio department of developmental disabilities.
- (6) "Employment first policy" means the state of Ohio policy, established in section 5123.022 of the Revised Code, that employment services for individuals with developmental disabilities be directed at community employment and that individuals with developmental disabilities are presumed capable of community employment.
- (7) "Employment services" means prevocational services or supported employment services.
- (8) "Individual" means a person with a developmental disability.
- (9) "Integrated setting" means a setting typically found in the community where individuals interact with persons who do not have disabilities to the same extent as persons who do not have disabilities in comparable positions.

- (2) Providers of employment services shall collect and submit to the department individual-specific data regarding employment services and employment outcomes including but not limited to, type of services provided, how individuals obtained employment, hours worked, wages earned, and occupations. The data shall be submitted through a web-based data collection system developed and maintained by the department.
- (3) Providers of employment services shall disseminate aggregate data regarding employment services and employment outcomes including but not limited to, type of services provided, how individuals obtained employment, hours worked, wages earned, and occupations, to individuals seeking employment services and others upon request. The data shall be disseminated in a manner that does not disclose confidential information regarding individuals receiving employment services.

"Integrated setting" includes employment settings in which employees interact with the community through technology.

- (10) "Prevocational services" means services that provide learning and work experiences from which an individual can develop general strengths and skills that are not specific to a particular task or job but contribute to employability in community employment, supported work at community-based sites, or self-employment. "Prevocational services" includes vocational habilitation funded in whole or part by a home and community-based services waiver administered by the department. Prevocational services shall be provided in accordance with the individual's individual plan or individual service plan, as applicable, and occur over a specified period of time with specific outcomes sought to be achieved.
- (11) "Provider" means an agency provider or an independent provider that is certified or licensed by the department.
- (12) "Supported employment services" means vocational assessment, job training and coaching, job development and placement, work site accessibility, and other services related to employment outside a sheltered workshop and includes all of the following:
- (a) Job training resulting in the attainment of community employment, supported work in a typical work environment, or self-employment;
 - (b) Support for ongoing community employment, supported work at community-based sites, or self-employment;
 - (c) Integrated employment funded in whole or part by a home and community-based services waiver administered by the department;
 - (d) Supported employment-community funded in whole or part by a home and community-based services waiver administered by the department;
and
 - (e) Supported employment-enclave funded in whole or part by a home and community-based services waiver administered by the department.
- (13) "Working age" means at least eighteen years of age.

(D) Person-centered planning process

- (1) Each individual of working age and each individual approaching completion of a program or service under Chapter 3323. of the Revised Code shall participate in an individualized person-centered planning process in accordance with, as applicable, rule 5123:2-1-11 of the Administrative Code or 42 C.F.R. 483.440 as in effect on the effective date of this rule, to identify

the individual's unique strengths, interests, abilities, preferences, resources, and desired outcomes as they relate to community employment. The person-centered planning process shall begin with a review of available information to determine what additional information is needed and what supplemental situational and/or other formal or informal evaluations are needed to discover this information. For individuals who receive public assistance, the importance of obtaining a benefits analysis shall be emphasized to enable the individual to make informed decisions regarding employment. Resources available for obtaining a benefits analysis shall be identified for the individual prior to job development.

(2) The person-centered planning process shall include identification and documentation of:

(a) The individual's place on the path to community employment, that is:

(i) The individual is already engaged in community employment and needs support for job stabilization, job improvement, or career advancement;

(ii) The individual expresses a desire to obtain community employment but is not currently employed and needs support to obtain employment or identify career options and employment opportunities;

(iii) The individual is unsure about community employment and needs support to identify career options and employment opportunities and the economic impact for the individual of the decision to work; or

(iv) The individual does not express a desire to work and needs support to learn more about careers and employment opportunities and the economic impact for the individual of the decision not to work.

(b) The individual's desired community employment outcome.

(c) Clearly defined activities, services, and supports necessary for the individual to achieve or maintain community employment, job improvement, or career advancement.

(3) The results of the person-centered planning process, including the individual's desired outcomes as they relate to community employment, shall be integrated into the individual plan or individual service plan, as applicable.

(4) The results of the person-centered planning process shall be reviewed at least once every twelve months and whenever a significant change in employment, training, continuing education, services, or supports occurs or is proposed.

Effective: 04/01/2014

R.C. 119.032 review dates: 04/01/2019

CERTIFIED ELECTRONICALLY

Certification

03/17/2014

Date

Promulgated Under: 119.03
Statutory Authority: 5123.022, 5123.04
Rule Amplifies: 5123.022, 5123.04, 5126.05, 5126.051

5123:2-2-06 Behavioral support strategies that include restrictive measures.(A) Purpose

This rule limits the use of and sets forth requirements for development and implementation of behavioral support strategies that include restrictive measures for the purpose of ensuring that:

- (1) Restrictive measures are used only when necessary to keep people safe;
- (2) Individuals with developmental disabilities are supported in a caring and responsive manner that promotes dignity, respect, and trust and with recognition that they are equal citizens with the same rights and personal freedoms granted to Ohioans without developmental disabilities;
- (3) Services and supports are based on an understanding of the individual and the reasons for his or her actions; and
- (4) Effort is directed at creating opportunities for individuals to exercise choice in matters affecting their everyday lives and supporting individuals to make choices that yield positive outcomes.

(B) Scope

- (1) This rule applies to persons and entities that provide specialized services regardless of source of payment, including but not limited to:
 - (a) County boards of developmental disabilities and entities under contract with county boards;
 - (b) Residential facilities licensed pursuant to section 5123.19 of the Revised Code, including intermediate care facilities;
 - (c) Providers of supported living certified pursuant to section 5123.161 of the Revised Code; and
 - (d) Providers of services funded by medicaid home and community-based services waivers administered by the department.
- (2) Individuals receiving services in a setting governed by the Ohio department of education shall be supported in accordance with administrative rules and policies of the Ohio department of education.

(C) Definitions

- (1) "County board" means a county board of developmental disabilities.
- (2) "Department" means the Ohio department of developmental disabilities.

- (3) "Director" means the director of the Ohio department of developmental disabilities or his or her designee.
- (4) "Individual" means a person with a developmental disability.
- (5) "Individual plan" or "individual service plan" means the written description of services, supports, and activities to be provided to an individual.
- (6) "Informed consent" means a documented written agreement to allow a proposed action, treatment, or service after full disclosure provided in a manner the individual or his or her guardian understands, of the relevant facts necessary to make the decision. Relevant facts include the risks and benefits of the action, treatment, or service; the risks and benefits of the alternatives to the action, treatment, or service; and the right to refuse the action, treatment, or service. The individual or his or her guardian, as applicable, may revoke informed consent at any time.
- (7) "Intermediate care facility" means an intermediate care facility for individuals with intellectual disabilities as defined in rule 5123:2-7-01 of the Administrative Code.
- (8) "Prohibited measure" means a method that shall not be used by persons or entities providing specialized services. "Prohibited measures" include:
- (a) Prone restraint. "Prone restraint" means a method of intervention where an individual's face and/or frontal part of his or her body is placed in a downward position touching any surface for any amount of time.
 - (b) Use of a manual restraint or mechanical restraint that has the potential to inhibit or restrict an individual's ability to breathe or that is medically contraindicated.
 - (c) Use of a manual restraint or mechanical restraint that causes pain or harm to an individual.
 - (d) Disabling an individual's communication device.
 - (e) Denial of breakfast, lunch, dinner, snacks, or beverages.
 - (f) Placing an individual in a room with no light.
 - (g) Subjecting an individual to damaging or painful sound.
 - (h) Application of electric shock to an individual's body.
 - (i) Subjecting an individual to any humiliating or derogatory treatment.

- (j) Squirting an individual with any substance as an inducement or consequence for behavior.
- (k) Using any restrictive measure for punishment, retaliation, instruction or teaching, convenience of providers, or as a substitute for specialized services.

(9) "Provider" means any person or entity that provides specialized services.

(10) "Qualified intellectual disability professional" has the same meaning as in 42 C.F.R. 483.430 as in effect on the effective date of this rule.

(11) "Restrictive measure" means a method of last resort that may be used by persons or entities providing specialized services only when necessary to keep people safe and with prior approval by the human rights committee in accordance with paragraph (F) of this rule. "Restrictive measures" include:

(a) Manual restraint. "Manual restraint" means use of a hands-on method, but never in a prone restraint, to control an identified action by restricting the movement or function of an individual's head, neck, torso, one or more limbs, or entire body, using sufficient force to cause the possibility of injury and includes holding or disabling an individual's wheelchair or other mobility device. An individual in a manual restraint shall be under constant visual supervision by staff. Manual restraint shall cease immediately once risk of harm has passed. "Manual restraint" does not include a method that is routinely used during a medical procedure for patients without developmental disabilities.

(b) Mechanical restraint. "Mechanical restraint" means use of a device, but never in a prone restraint, to control an identified action by restricting an individual's movement or function. Mechanical restraint shall cease immediately once risk of harm has passed. "Mechanical restraint" does not include:

(i) A seatbelt of a type found in an ordinary passenger vehicle or an age-appropriate child safety seat;

(ii) A medically-necessary device (such as a wheelchair seatbelt or a gait belt) used for supporting or positioning an individual's body;
or

(iii) A device that is routinely used during a medical procedure for patients without developmental disabilities.

(c) Time-out. "Time-out" means confining an individual in a room or area and preventing the individual from leaving the room or area by applying

physical force or by closing a door or constructing another barrier, including placement in such a room or area when a staff person remains in the room or area.

(i) Time-out shall not exceed thirty minutes for any one incident nor one hour in any twenty-four hour period.

(ii) A time-out room or area shall not be key-locked, but the door may be held shut by a staff person or by a mechanism that requires constant physical pressure from a staff person to keep the mechanism engaged.

(iii) A time-out room or area shall be adequately lighted and ventilated and provide a safe environment for the individual.

(iv) An individual in a time-out room or area shall be protected from hazardous conditions including but not limited to, sharp corners and objects, uncovered light fixtures, or unprotected electrical outlets.

(v) An individual in a time-out room or area shall be under constant visual supervision by staff.

(vi) Time-out shall cease immediately once risk of harm has passed or if the individual engages in self-abuse, becomes incontinent, or shows other signs of illness.

(vii) "Time-out" does not include periods when an individual, for a limited and specified time, is separated from others in an unlocked room or area for the purpose of self-regulating and controlling his or her own behavior and is not physically restrained or prevented from leaving the room or area by physical barriers.

(d) Chemical restraint. "Chemical restraint" means a medication prescribed for the purpose of modifying, diminishing, controlling, or altering a specific behavior. "Chemical restraint" does not include medications prescribed for the treatment of a diagnosed disorder identified in the "Diagnostic and Statistical Manual of Mental Disorders" (fifth edition) or medications prescribed for treatment of a seizure disorder. "Chemical restraint" does not include a medication that is routinely prescribed in conjunction with a medical procedure for patients without developmental disabilities.

(e) Restriction of an individual's rights as enumerated in section 5123.62 of the Revised Code.

- (12) "Risk of harm" means there exists a direct and serious risk of physical harm to the individual or another person. For risk of harm, the individual must be capable of causing physical harm to self or others and the individual must be causing physical harm or very likely to begin causing physical harm.
- (13) "Service and support administrator" means a person, regardless of title, employed by or under contract with a county board to perform the functions of service and support administration and who holds the appropriate certification in accordance with rule 5123:2-5-02 of the Administrative Code.
- (14) "Specialized services" means any program or service designed and operated to serve primarily individuals with developmental disabilities, including a program or service provided by an entity licensed or certified by the department. If there is a question as to whether a provider or entity under contract with a provider is providing specialized services, the provider or contract entity may request that the director of the department make a determination. The director's determination is final.
- (15) "Team," as applicable, has the same meaning as in rule 5123:2-1-11 of the Administrative Code or means an interdisciplinary team as that term is used in 42 C.F.R. 483.440 as in effect on the effective date of this rule.

(D) Development of a behavioral support strategy that includes restrictive measures

- (1) A behavioral support strategy shall never include prohibited measures.
- (2) A behavioral support strategy may include manual restraint, mechanical restraint, time-out, or chemical restraint only when an individual's actions pose risk of harm.
- (3) A behavioral support strategy may include restriction of an individual's rights only when an individual's actions pose risk of harm or are very likely to result in the individual being the subject of a legal sanction such as eviction, arrest, or incarceration. Absent risk of harm or likelihood of legal sanction, an individual's rights shall not be restricted (e.g., by imposition of arbitrary schedules or limitation on consumption of food, beverages, or tobacco products).
- (4) The focus of a behavioral support strategy shall be creation of supportive environments that enhance the individual's quality of life. Effort is directed at:
- (a) Mitigating risk of harm or likelihood of legal sanction;
- (b) Reducing and ultimately eliminating the need for restrictive measures; and

(c) Ensuring individuals are in environments where they have access to preferred activities and are less likely to engage in unsafe actions due to boredom, frustration, lack of effective communication, or unrecognized health problems.

(5) A behavioral support strategy that includes restrictive measures requires:

(a) Documentation that demonstrates that positive and non-restrictive measures have been employed and have been determined ineffective; and

(b) An assessment conducted within the past twelve months that clearly describes:

(i) The behavior that poses risk of harm or likelihood of legal sanction;

(ii) The level of harm or type of legal sanction that could reasonably be expected to occur with the behavior;

(iii) When the behavior is likely to occur; and

(iv) The individual's interpersonal, environmental, medical, mental health, and emotional needs and other motivational factors that may be contributing to the behavior.

(6) Persons who conduct assessments and develop behavioral support strategies that include restrictive measures shall:

(a) Hold professional license or certification issued by the Ohio board of psychology; the state medical board of Ohio; or the Ohio counselor, social worker, and marriage and family therapist board; or

(b) Hold a certificate to practice as a certified Ohio behavior analyst pursuant to section 4783.04 of the Revised Code; or

(c) Hold a bachelor's or graduate-level degree from an accredited college or university and have at least three years of paid, full-time (or equivalent part-time) experience in developing and/or implementing behavioral support and/or risk reduction strategies or plans.

(7) A behavioral support strategy that includes restrictive measures shall:

(a) Be designed in a manner that promotes healing, recovery, and emotional wellbeing based on understanding and consideration of the individual's history of traumatic experiences as a means to gain insight into origins and patterns of the individual's actions;

- (b) Be data-driven with the goal of improving outcomes for the individual over time and describe behaviors to be increased or decreased in terms of baseline data about behaviors to be increased or decreased.
 - (c) Recognize the role environment plays in behavior;
 - (d) Capitalize on the individual's strengths to meet challenges and needs;
 - (e) Delineate measures to be implemented and identify those who are responsible for implementation;
 - (f) Specify steps to be taken to ensure the safety of the individual and others;
 - (g) As applicable, identify needed services and supports to assist the individual in meeting court-ordered community controls such as mandated sex offender registration, drug-testing, or participation in mental health treatment; and
 - (h) As applicable, outline necessary coordination with other entities (e.g., courts, prisons, hospitals, and law enforcement) charged with the individual's care, confinement, or reentry to the community.
- (8) When a behavioral support strategy that includes restrictive measures is deemed necessary by the individual and his or her team, the qualified intellectual disability professional or the service and support administrator, as applicable, shall:
- (a) Ensure the strategy is developed in accordance with the principles of person-centered planning and incorporated as an integral part of the individual plan or individual service plan.
 - (b) Submit to the human rights committee documentation based upon the assessment that clearly indicates risk of harm or likelihood of legal sanction described in observable and measurable terms and ensure the strategy is reviewed and approved by the human rights committee in accordance with paragraph (F) of this rule prior to implementation and whenever the behavioral support strategy is revised to add restrictive measures, but no less than once per year.
 - (c) Secure informed consent of the individual or the individual's guardian, as applicable.
 - (d) Provide an individual or the individual's guardian, as applicable, with written notification and explanation of the individual's or guardian's right to seek administrative resolution if he or she is dissatisfied with the strategy or the process used for its development.

- (e) Ensure the strategy is reviewed by the individual and the team at least every ninety days to determine and document the effectiveness of the strategy and whether the strategy should be continued, discontinued, or revised. A decision to continue the strategy shall be based upon review of up-to-date information which indicates risk of harm or likelihood of legal sanction is still present.

(E) Implementation of behavioral support strategies with restrictive measures

- (1) Restrictive measures shall be implemented with sufficient safeguards and supervision to ensure the health, welfare, and rights of individuals receiving specialized services.
- (2) Each person providing specialized services to an individual with a behavioral support strategy that includes restrictive measures shall successfully complete training in the strategy prior to serving the individual.

(F) Human rights committees

- (1) Each county board, or county board jointly with one or more other county boards, or county board jointly with one or more providers, and each intermediate care facility shall establish a human rights committee to safeguard individuals' rights and protect individuals from physical, emotional, and psychological harm. The human rights committee shall:
- (a) Be comprised of at least four persons;
- (b) Include at least one individual who receives or is eligible to receive specialized services;
- (c) Include qualified persons who have either experience or training in contemporary practices for behavioral support; and
- (d) Reflect a balance of representatives from each of the following two groups:
- (i) Individuals who receive or are eligible to receive specialized services or family members or guardians of individuals who receive or are eligible to receive specialized services; and
- (ii) County boards or providers.
- (2) All information and documents provided to the human rights committee and all discussions of the committee shall be confidential and shall not be shared or discussed with anyone other than the individual and his or her guardian and the individual's team.

(3) The human rights committee shall review, approve or reject, monitor, and reauthorize strategies that include restrictive measures. In this role, the human rights committee shall:

(a) Ensure that the planning process outlined in this rule has been followed and that the individual or the individual's guardian, as applicable, has provided informed consent and been afforded due process;

(b) Ensure that the proposed restrictive measures are necessary to reduce risk of harm or likelihood of legal sanction;

(c) Ensure that the overall outcome of the behavioral support strategy promotes the physical, emotional, and psychological wellbeing of the individual while reducing risk of harm or likelihood of legal sanction;

(d) Ensure that a restrictive measure is temporary in nature and occurs only in specifically defined situations based on risk of harm or likelihood of legal sanction;

(e) Verify that any behavioral support strategy that includes restrictive measures also incorporates actions designed to enable the individual to feel safe, respected, and valued while emphasizing choice, self-determination, and an improved quality of life; and

(f) Communicate the committee's determination in writing to the qualified intellectual disability professional or service and support administrator submitting the request for approval.

(4) Members of the human rights committee shall receive department-approved training within three months of appointment to the committee in: rights of individuals as enumerated in section 5123.62 of the Revised Code, person-centered planning, informed consent, confidentiality, and the requirements of this rule.

(5) Members of the human rights committee shall annually receive department-approved training in relative topics which may include but are not limited to: self-advocacy and self-determination; role of guardians and section 5126.043 of the Revised Code; effect of traumatic experiences on behavior; and court-ordered community controls and the role of the court, the county board, and the human rights committee.

(G) Use of a restrictive measure without prior approval by the human rights committee

(1) Use of a restrictive measure, including use of a restrictive measure in a crisis situation (e.g., to prevent an individual from running into traffic), without prior approval by the human rights committee shall be reported as

"unapproved behavior support" in accordance with rule 5123:2-17-02 of the Administrative Code.

- (2) Nothing in this rule shall be construed to prohibit or prevent any person from intervening in a crisis situation as necessary to ensure a person's immediate health and safety.

(H) Reporting of behavioral support strategies that include restrictive measures

After securing approval by the human rights committee and prior to implementation of a behavioral support strategy that includes restrictive measures, the county board or intermediate care facility shall notify the department in a format prescribed by the department.

(I) Recording use of restrictive measures

Each provider shall maintain a record of the date, time, duration, and antecedent factors regarding each use of a restrictive measure other than a restrictive measure that is not based on antecedent factors (e.g., bed alarm or locked cabinet). The provider shall share the record with the individual and the individual's team whenever the individual's behavioral support strategy is being reviewed or reconsidered.

(J) Analysis of behavioral support strategies that include restrictive measures

- (1) Each county board and each intermediate care facility shall compile and analyze data regarding behavioral support strategies that include restrictive measures and furnish the data and analyses to the human rights committee. Data compiled and analyzed shall include, but are not limited to:
- (a) Nature and frequency of risk of harm or likelihood of legal sanction that triggered development of strategies that include restrictive measures;
 - (b) Nature and number of strategies reviewed, approved, rejected, and reauthorized by the human rights committee;
 - (c) Nature and number of restrictive measures implemented;
 - (d) Duration of strategies that include restrictive measures implemented; and
 - (e) Effectiveness of strategies that include restrictive measures in terms of increasing or decreasing behaviors as intended.
- (2) County boards and intermediate care facilities shall make the data and analyses available to the department upon request.

(K) Department oversight

- (1) The department shall take immediate action as necessary to protect the health and welfare of individuals which may include, but is not limited to:
 - (a) Suspension of a behavioral support strategy not developed, implemented, documented, or monitored in accordance with this rule or where trends and patterns of data suggest the need for further review;
 - (b) Provision of technical assistance in development or redevelopment of a behavioral support strategy; and
 - (c) Referral to other state agencies or licensing bodies, as indicated.
- (2) The department shall compile and analyze data regarding behavioral support strategies for purposes of determining methods for enhancing risk reduction efforts and outcomes, reducing the frequency of restrictive measures, and identifying technical assistance and training needs. The department shall make the data and analyses available.
- (3) The department may periodically select a sample of behavioral support strategies for review to ensure that strategies are developed, implemented, and monitored in accordance with this rule.
- (4) The department shall conduct reviews of county boards and providers as necessary to ensure the health and welfare of individuals and compliance with this rule. Failure to comply with this rule may be considered by the department in any regulatory capacity, including certification, licensure, and accreditation.

(L) Waiver of provisions of this rule

For adequate reasons and when requested in writing by a county board or provider, the director may waive a condition or specific requirement of this rule except that the director shall not permit use of a prohibited measure as defined in paragraph (C)(8) of this rule. The director shall grant or deny a request for a waiver within ten working days of receipt of the request or within such longer period of time as the director deems necessary and put whatever conditions on the waiver as are determined to be necessary. Approval to waive a condition or specific requirement of this rule shall not be contrary to the rights, health, or safety of individuals receiving services. The director's decision to grant or deny a waiver is final and may not be appealed.

Replaces: 5123:2-3-25, part of 5123:2-1-02
Effective: 01/01/2015
Five Year Review (FYR) Dates: 01/01/2020

CERTIFIED ELECTRONICALLY

Certification

12/22/2014

Date

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Rule Amplifies: 5123.04, 5123.19, 5123.62, 5124.02, 5124.03, 5126.08
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06/02/1995 (Emer.), 12/09/1995, 02/28/1996 (Emer.),
05/28/1996, 07/12/1997, 08/01/2001, 03/21/2002



JOHN R. KASICH
GOVERNOR
STATE OF OHIO

Executive Order 2012-05K

The Establishment of the Employment First Policy and Taskforce
to Expand Community Employment Opportunities
for Working-Age Ohioans with Developmental Disabilities

WHEREAS, all Ohioans, including those with developmental disabilities, should be encouraged to take part in the workforce and to bring their individual strengths and talents to participate in Ohio business and industry.

WHEREAS, Ohioans with developmental disabilities experience some of the highest rates of unemployment, underemployment and poverty, and have little exposure to community employment options.

WHEREAS, Ohio's developmental disability system currently spends less than 6% of available adult service funding on placing and supporting individuals with developmental disabilities in the general workforce.

WHEREAS, current state and federal efforts strive to redirect Medicaid spending to promote community-based services.

WHEREAS, my Administration has established community employment and school-to-work transition as priorities.

WHEREAS, individuals with developmental disabilities have the right to make informed decisions about where they work, and to have opportunities to obtain community jobs that may result in greater earnings, better benefits, improved health and increased quality of life.

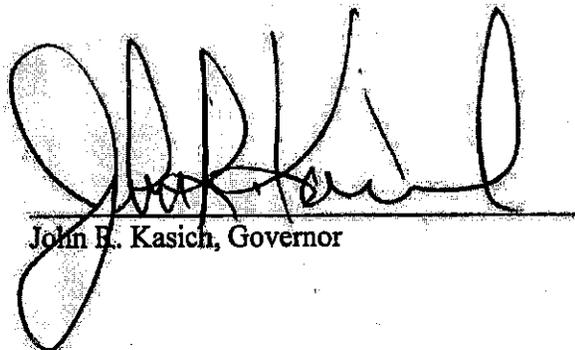
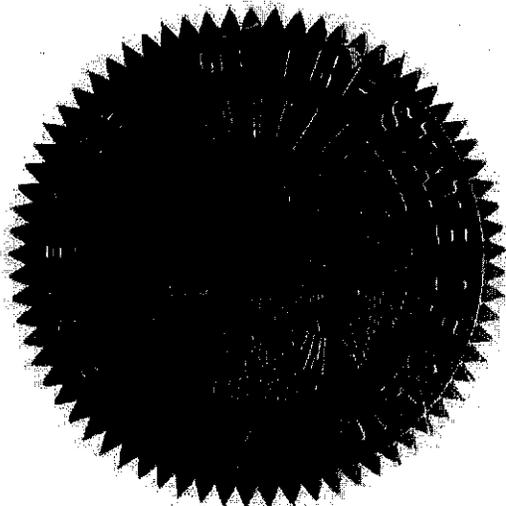
WHEREAS, Ohio seeks to benefit from the State Employment Leadership Network's (SELN's) review of Ohio's current system of supporting employment for persons with developmental disabilities.

WHEREAS, Ohio seeks to improve and coordinate efforts to increase community employment outcomes for working-age Ohioans with developmental disabilities.

NOW THEREFORE, I, John R. Kasich, Governor of the State of Ohio, by virtue of the authority vested in me by the Constitution and laws of this State, do hereby order and direct that:

1. Community employment shall be the priority and the preferred outcome for working-age Ohioans with disabilities.
2. The Governor's Employment First Taskforce ("EFT") is created to collaborate, coordinate and improve employment outcomes for working-age adults with developmental disabilities. In the first six months following the effective date of this Executive Order, the EFT shall do the following:
 - a. Review and consider the recommendations of the State Employment Leadership Network report to increase opportunities for community employment for Ohioans with developmental disabilities.
 - b. Review and align policies, procedures, eligibility, and enrollment and planning for services for individuals, with the objective of increasing opportunities for community employment for Ohioans with developmental disabilities.
 - c. Develop cross-agency tools to document eligibility, order of selection, assessment and planning for services for individuals.
 - d. Identify best practices, effective partnerships, sources of available federal funds, opportunities for shared services among existing providers and county boards of developmental disabilities, and the means to expand model programs, to increase community employment opportunities for those with developmental disabilities.
 - e. Identify and address areas where sufficient support is not currently available or where additional options are needed to assist those with developmental disabilities to work in community jobs.
 - f. Establish interagency agreements to improve coordination of services and allow for data sharing as appropriate.
 - g. Set benchmarks for improving community employment outcomes/services.
3. I appoint the Ohio Department of Developmental Disabilities (DODD) to lead the EFT. DODD shall oversee and implement the activities described above. The EFT also shall include representatives from the Ohio Department of Education (ODE), Ohio Department of Job and Family Services (ODJFS), Ohio Department of Mental Health (ODMH), and Ohio Rehabilitation Services Commission (ORSC) who have authority to act on behalf of their respective agencies.
4. The DODD shall also have the authority to establish an Advisory Committee made up of business stakeholders, self-advocates and other stakeholders in the developmental disabilities field to provide the EFT with needed information and recommendations.
5. All Cabinet Agencies, Boards and Commissions shall comply with requests issued by the EFT, subject to the supervision of their respective agency directors.

I signed this Executive Order on March 19th, 2012, in Dublin, Ohio and it will not expire unless it is rescinded.



John E. Kasich, Governor

ATTEST:

Jon Husted, Secretary of State