

Lawrence County Developmental Disabilities

General Board Policy Manual

Our Mission: Promote advocacy, inclusion and personal growth.



Our Vision: People of all abilities feel included in our community.

Our Core Values:

Communication

Accountability

Safety

Integrity

Compassion

Update: 7/23/2024

Administrative Review: 09/2019

**LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES
GENERAL POLICY MANUAL**

TABLE OF CONTENTS

SECTION I

THE BOARD

1.01	Board Philosophy
1.02	County Board and Membership
1.03	Board Member In-Service Training
1.04	Duties of the Board
1.05	Officers of the Board
1.06	Employment of Superintendent
1.07	Meetings of the Board
1.08	Public Participation
1.09	Minutes of Meetings
1.10	Authority of Members
1.11	Order of Business and Rules of Order
1.12	Committees of the Board
1.13	Public Notice
1.14	Board Member Code of Ethics
1.15	Compensation of Expenses
1.16	Ethics Council
1.17	Removal of Board Members
1.18	Remote Board Member Participation

SECTION II

BOARD OPERATIONS

2.01	Board Policies
2.02	Gifts, Grants and Bequests
2.03	Contracts
2.04	Fees for Services
2.05	Communications & Public Relations
2.06	Volunteer Services
2.07	Records Retention
2.08	Public Records Access
2.09	Electronic Signature
2.10	Document Imaging
2.11	Fiscal
2.12	Credit Cards and Accounts
2.13	Payer of Last Resort
2.14	Non-Retaliation
2.15	Expenditure of Public Funds
2.16	Annual Planning
2.17	Recognition of Service and Retirement
2.18	Procurement – Federal Grants/Funds

SECTION III

PROGRAMS

3.01	Early Intervention
3.01A	Early Intervention Home Visits
3.02	Education of Children with Disabilities
3.03	School Age Services
3.03.A	Appendix A
3.03.B	Appendix B (PBIS)
3.04	Service and Support Administration
3.05	Family Support Services
3.06	General Fund Requests
3.07	-----
3.08	Transportation
3.09	Home and Community Based Waivers
3.10	Comprehensive Social Services Block Grant
3.11	Targeted Case Management Services
3.12	Employment First
3.13	Title IX
3.14	Waiver Administrative Claiming
3.15	Anti-Harassment, Intimidation or Bullying
3.16	Technology First

SECTION IV

RIGHTS OF INDIVIDUALS SERVED

4.01	Nondiscrimination of Individuals Served
4.02	Accessibility
4.03	Eligibility Determination
4.04	The Rights of Individuals with DD
4.05	Individual Service Plan
4.06	HCBS Free Choice of Provider
4.07	Administrative Resolution of Complaints Due Process
4.08	Confidentiality of Information
4.09	Waiting List
4.10	Self-Determination

SECTION V

HEALTH & SAFETY

5.01	Health and Safety
5.02	Addressing Major Unusual Incidents and Unusual Incidents
5.03	Development & Implementation of Behavior Support Strategies
5.04	Quality Assurance
5.05	Medication Administration and Delegated Nursing Definitions
5.06	Medication Administration and Delegated Nursing
5.07	Surveillance
5.08	COVID 19
5.09	Preadmission Screening and Resident Review
5.10	Sexual Offenders

5.11	No policy
5.12	No policy
5.13	No policy
5.14	DD Safety Program
5.15	Wellness School Policies

SECTION VI

HEALTH & SAFETY

6.01	No policy
6.02	Use of Buildings
6.03	Firearms

BOARD PHILOSOPHY

Lawrence County DD believes that all individuals have the capacity to grow and learn. We believe in the concept of self-determination, and that all individuals have the right to make decisions for themselves to the fullest extent possible. We believe in supporting individuals and their families in making informed decisions about how to live their best life.

The execution of Board policy and the administration of the program shall be the responsibility of the Superintendent and the administrative staff in accordance with the agency's vision, mission and values.

- A. Our Vision: People of all abilities feel included in our community.
- B. Our Mission: Promote advocacy, inclusion and personal growth.
- C. Our Values: Communication, Accountability, Safety, Integrity and Compassion are our core values. Our logo is a plant that stands tall which promotes advocacy. This plant is among others to promote inclusion. Just like the individuals served, with time and care, the plant will grow. The plant's colors each symbolize the core values: Orange is the color for communication; White is the color for accountability; Green is the color for safety; Blue is the color for integrity, and Pink is the color for compassion.

COUNTY BOARD and BOARD MEMBERSHIP

- A. Each county shall have its own county board of developmental disabilities subject to section 5126.02 of the Ohio Revised Code (ORC).
 - 1. The Lawrence County Board of Developmental Disabilities shall operate as a separate administrative and service entity.
 - 2. The functions of the board shall not be combined with the functions of any other entity of county government.
- B. The board may share administrative functions or personnel with one or more other county boards.
- C. The board shall consist of seven members. The board of county commissioners of the county shall appoint five members and the senior probate judge of the county shall appoint two members in accordance with ORC 5126.022.
- D. None of the following individuals may serve as a member of the Board:
 - 1. An elected public official, except for a township trustee, township fiscal officer, or individual excluded from the definition of public official or employee in division (B) of ORC 102.01;
 - 2. An immediate family member of another Lawrence county board member;
 - 3. An employee of any county board or an immediate family member of a Lawrence County Board employee;
 - 4. A former employee of the Lawrence county board whose employment with the county board ceased less than four calendar years before the former employee would begin to serve as a member of the Lawrence county board; and a former employee of another county board whose employment with the county board ceased less than two calendar years before the former employee would begin to serve as a member of the county board;
 - 5. Unless there is no conflict of interest, an individual who or whose immediate family member is a board member of an agency licensed or certified by the department of developmental disabilities to provide services to individuals with or developmental disabilities or an individual who or whose immediate family member is an employee of such an agency;
 - 6. An individual with an immediate family member who serves as a county commissioner of a county served by the county Agency unless the individual was a member of the county board before October 31, 1980.
- E. **CONFLICT OF INTEREST:** A board member shall not vote on any matter before the board concerning a contract agency of which the member or an immediate family member of the member is also a board member or an employee.

- F. The board shall direct all questions relating to the existence of a conflict of interest for the purpose of this policy to the local prosecuting attorney for resolution. The board shall direct all other questions of ethics to The Ohio Ethics Commission.
- G. Prior to appointment or reappointment to the board all individuals must provide to the appointing authority a written declaration specifying both of the following:
 - 1. That no circumstance described paragraph D above exists that bars the individual from serving on the board;
 - 2. Whether the individual or an immediate family member of the individual has an ownership interest in or is under contract with an agency contracting with the board, and, if such an ownership interest or contract exists, the identity of the agency and the nature of the relationship to that board.
- H. Board members shall complete in-service training requirements in accordance with OAC 5123:2-1-13.
- I. Lawrence County Board member time and terms of appointment, reappointment & vacancies shall be in accordance with ORC sections 5126.025 - 5126.027.

Reference: ORC 5126.02, 5126.021, 5126.0210, 5126.0211, 5126.0212 5126.023, 5126.024, 5126.028

Adopted: 5/8/18

BOARD MEMBER IN-SERVICE TRAINING

- A. In-service training means training of board members pursuant to ORC 5126.0210 that may include, but is not limited to, training arranged by the superintendent, statewide conferences sponsored by the Ohio association of county boards serving people with developmental disabilities or other organizations, webinars offered by the department, training completed on-line, and presentations by outside speakers.
- B. In-service training requirements:
 - 1. Within three months after a board member's initial appointment to the Agency, the board member shall complete an orientation that addresses duties of the county board, role and requirements of board members, confidentiality, and the ethics laws of the state of Ohio. The orientation completed in accordance with this paragraph may count toward the hours of in-service training specified in paragraphs B.2 and B.3 of this procedure.
 - 2. During each calendar year of a board member's term, the board member shall complete a minimum of four hours of in-service training, except as provided in paragraph B.3 of this procedure.
 - 3. Board members appointed after the county board's annual organizational meeting and board members appointed for the remainder of a former board member's term shall complete in-service training during the first calendar year of the board member's appointment in accordance with the following schedule:
 - a. Board members appointed on or before March thirty-first shall complete a minimum of four hours of in-service training.
 - b. Board members appointed after March thirty-first but prior to July first shall complete a minimum of three hours of in-service training.
 - c. Board members appointed after June thirtieth but prior to October first shall complete a minimum of two hours of in-service training.
 - d. Board members appointed after September thirtieth but prior to the succeeding January first shall complete a minimum of one hour of in-service training.
 - 4. The county board and the superintendent shall jointly develop the county board's plan for in-service training for the calendar year which:
 - a. Reflects the topics identified by the director of DODD with consideration of priorities within the county;
 - b. Includes perspectives from outside the county; and
 - c. Recognizes that training for specific board members may vary based on board members' background and experience.
 - 5. The superintendent shall make board members aware of opportunities to complete in-service training.
 - 6. The superintendent shall maintain documentation of board members' completion of in-service training which shall include:
 - a. An outline or description that details the content of the training;
 - b. The date, time, location, and duration of the training; and

- c. A sign-in sheet or email in which the board member attests to completing the training.
- 7. In-service training sessions shall not be considered regularly scheduled meetings of the county board.

Reference: OAC 5123:2-1-13

Revised: 5/8/18, 2/21/06

Adopted: 3/18/03

DUTIES OF THE BOARD

Subject to the rules established by the Director of the Ohio Department of Developmental Disabilities (DODD) for programs and services offered pursuant to Chapter 5126 of the Ohio Revised Code (ORC), and subject to the rules established by the Ohio State Board of Education for programs and services offered pursuant to Chapter 3323 of the ORC, the Lawrence County Board of Developmental Disabilities (henceforth called the Agency) shall:

- A. Administer and operate facilities, programs, and services as provided by Chapter 5126 and Chapter 3323 of the ORC and establish policies for their administration and operation;
- B. Coordinate, monitor, and evaluate existing services and facilities available to individuals with developmental disabilities;
- C. Provide early childhood services, supportive home services, and Employment First services, according to the plan and priorities developed under Section 5126.04 of the ORC;
- D. Provide or contract for special education services pursuant to Chapters 3317 and 3323 of the ORC and ensure that related services, as defined in section 3323.01 of the ORC are available according to the plan and priorities developed under section 5126.04 of the ORC;

On or before the first day of February prior to the school year, the Board may elect not to participate during that school year in the provision of or contracting for educational services for children ages six through twenty-one years of age, provided that on or before that date the Board gives notice of this election to the superintendent of public instruction, each school district in the county, and the educational service center serving the county. If a board makes this election, it shall not have any responsibility for or authority to provide educational services that school year for children ages six through twenty-one years of age. If a board does not make an election for a school year in accordance with this division, the board shall be deemed to have elected to participate during that school year in the provision of or contracting for educational services for children ages six through twenty-one years of age.

- E. Pursuant to ORC 5126.0219, provide for a qualified Superintendent by either employing a Superintendent or obtaining the services of the Superintendent of another county board.
- F. Adopt a budget, authorize expenditures for the purposes listed in this section and do so in accordance with section 319.16 of the ORC, approve attendance of board members and staff at professional meetings and approve expenditures for attendance, and exercise such powers and duties as are prescribed by the DODD;
- G. Submit annual reports of its work and expenditures, pursuant to sections 3323.09 and 5126.12 of the ORC, to the DODD, the Superintendent of Public Instruction, and the Lawrence County Board of County Commissioners at the close of the fiscal year and at such other times as may reasonably be requested;

- H. Authorize all positions of employment, establish compensation, including but not limited to salary schedules and fringe benefits for all Agency staff, approve contracts of employment for management staff that are for a term of more than one year, employ legal counsel under section 309.10 of the ORC, and contract for staff benefits;
- I. Provide service and support administration in accordance with section 5126.15 of the ORC;
- J. Certify respite care homes pursuant to rules adopted under section 5123.171 of the ORC by the Director of the ODDD;
- K. Enter into contracts with other such boards and with public or private, nonprofit, or profit making agencies or organizations of the same or another county, to provide the facilities, programs, and services authorized or required upon such terms as may be agreeable and in accordance with Chapter 5126 and Chapter 3323 of the ORC and rules adopted there under and in accordance with sections 307.86 and 5126.071 of the ORC;
- L. Purchase all necessary insurance policies. May purchase equipment and supplies through the Ohio Department of Administrative Services or from other sources, and may enter into agreements with public agencies or nonprofit organizations for cooperative purchasing arrangements;
- M. Receive by gift, grant, devise, or bequest any moneys, lands, or property for the benefit of the purposes for which the Agency is established and hold, apply, and dispose of the moneys, lands, and property according to the terms of the gift, grant, devise, or bequest;
- N. Receive all federal, state and local funds and deposit them to the appropriate accounts established by the County Auditor and provide such funds as are necessary for the operation of all Agency programs through the means as provided by the law. The Agency shall not expend public funds for purposes prohibited by the laws of the State of Ohio;
- O. Inform the public concerning the progress and needs of the programs for persons with developmental disabilities;
- P. Carry out all reasonably necessary negotiations with the DODD, the Ohio Department of Mental Health, the Ohio Department of Education, the Ohio Department of Administrative Services, the Lawrence County Board of County Commissioners, and other agencies to effectively carry out the provisions of the law and the intent of any contract the Agency has made or may make with any other public or non-profit agency or organization;
- Q. Initiate questions of policy for consideration, research and follow up by its Superintendent;
- R. Consider and act upon the recommendations of its Superintendent in matters of policy;

Policy adopted pursuant to 5126.04, 5126.05, and 5126.054, of the ORC and 5123:2-1-02 of the Ohio Administrative Code.

Revised: 5/8/18

Adopted: 2/21/06

OFFICERS OF THE BOARD

A. Election of Officers

1. The election of officers of the Lawrence County Developmental Disabilities shall be at the annual organization meeting and shall include a president, vice-president, and recording secretary. The Board may elect any other officers as determined to be necessary or expedient to conduct business. Officers shall be elected for one year and shall serve until their successors are elected.
2. No member shall hold more than one office.
3. Nominations for the new officers may be brought to the Board by the nominating committee appointed by the President. Nominations may also be made from the floor. The election may be by ballot or vote.

B. Duties of Officers

1. The duties of the president shall be to preside at all meetings of the Board and to perform such other duties as may be prescribed by law or by action of the Board. The president shall represent the Board as a spokesperson on all public matters relating to the Board (the president may delegate this function in writing), and appoint committees, and Board Members to fill committee assignments.
2. The vice president shall preside in the absence of the president and shall perform such duties as may be assigned by the Board.
3. The Recording Secretary shall keep a complete record of all actions, resolutions and meetings of the Board, including a complete statement of approved expenditures and resolutions acted upon. The recording secretary shall file a certified copy of the Board minutes in the Board office as a repository, provide each member of the Board with a copy of the minutes including a complete statement of approved expenditures and resolutions acted upon, and perform other such duties designated by the president or assigned by the Board.

C. Officer Vacancy

In the event an officer vacancy occurs during a term of office, the members of the Board shall hold an election to fill that vacancy.

Revised: 8/13/19, 5/8/18

Adopted: 2/21/06

Lawrence County Developmental Disabilities

Policy 1.06 - EMPLOYMENT AND DUTIES OF SUPERINTENDENT

- A. The Board (employing its own Superintendent) shall employ the Superintendent under a contract.
 - 1. The Board shall adopt a resolution agreeing to the contract.
 - 2. Each contract for employment or re-employment of a Superintendent shall be for a term of not less than one and not more than five years.
 - 3. At the expiration of a Superintendent's current term of employment, the Superintendent may be re-employed.
 - 4. If the Board intends not to re-employ the Superintendent, the Board shall give the Superintendent written notification of its intention. The notice shall be given not less than ninety days prior to the expiration of the Superintendent's contract, unless the Superintendent's contract stipulates something different.
- B. The Board shall prescribe the duties of its Superintendent and review the Superintendent's performance. The Superintendent may be removed, suspended, or demoted for cause pursuant to ORC 5126.23. The Board shall fix the Superintendent's compensation and reimburse the Superintendent for actual and necessary expenses.
- C. If the Superintendent position becomes vacant, the Board first shall consider entering into an agreement with another county Board for the sharing of a Superintendent under ORC 5126.0219. If the Board determines there are no significant efficiencies or it is impractical to share a Superintendent, the Board may employ a Superintendent.
 - 1. Two or more County Boards may enter into an arrangement under which the Superintendent of one County Board acts as the Superintendent of another county Board.
 - 2. To enter into such an arrangement, each Board shall adopt a resolution agreeing to the arrangement.
 - 3. The resolutions shall specify the duration of the arrangement and the contribution each Board is to make to the Superintendent's compensation and reimbursement for expenses.
 - 4. During the vacation The Board may appoint a person who holds a valid Superintendent's certificate issued under the rules of the DODD to work under a contract for an interim period not to exceed one hundred eighty days until a permanent Superintendent can be employed or arranged. The director of the DODD may approve additional periods of time for these types of interim appointments when so requested by a resolution adopted by the Board, if the director determines that the additional periods are warranted and the services of a permanent Superintendent are not available.
- D. DUTIES OF THE SUPERINTENDENT
 - 1. The Superintendent of the Lawrence County Board of Developmental Disabilities shall:
 - a. Administer the work of the Board, subject to the Board's rules.
 - b. Recommend to the Board the changes necessary to increase the effectiveness of the programs and services offered pursuant to ORC Chapters 5126 and 3323.
 - c. Employ persons for all positions authorized by the Board, approve contracts of

employment for management employees that are for a term of one year or less, and approve personnel actions that involve employees in the classified civil service as may be necessary for the work of the Board.

- d. Approve compensation for employees within the limits set by the salary schedule and budget set by the Board and in accordance with ORC 5126.26, and ensure that all employees and consultants are properly reimbursed for actual and necessary expenses incurred in the performance of official duties.
- e. Provide consultation to public agencies as defined in ORC 102.01(C), including other county Boards of developmental disabilities, and to individuals, agencies, or organizations providing services supported by the Board.
- f. Negotiate the terms of, act as liaison officer for, and execute all contracts the Board may enter with another Board of another county or with a public or non-profit agency or other organizations to provide programs and services authorized in Sections 5123 and 3323 of the ORC.
- g. Receive and track all federal, state, and local funds and deposit them into appropriate funds.
- h. Review and authorize payment of vouchers to the County Auditor to fulfill obligations of the Board, in accordance with the budget approved by the County Board of DD, and handle the details of and expend the proper funds for the operation of its program as well as for services for which the Board has contracted.

Reference: ORC 5126.0219

Revised: 03/08/22

Revised: 05/08/18

Adopted: 02/21/06

MEETINGS OF THE BOARD

- A. In accordance with law, the Board shall hold its regular meetings at least ten (10) times annually, including the January organizational meeting.
- B. All meetings of the Board shall be held at the Agency's Administrative Offices unless conditions make it advisable that another place be selected, or as otherwise determined by a majority vote of the Board. At least twenty-four hours advance notice will be given to the news media that have requested notification when another location is selected for a meeting of the Board.
- C. The Board will keep a record of Board proceedings, which shall be open for public inspection.
- D. The annual organizational meeting will be no later than the 31st day of January
 - 1. During the organizational meeting the Board will:
 - a. appoint an Ethics Council;
 - b. elect its officers, consisting of a President, Vice President, and Recording Secretary;
 - c. Adopt rules for the conduct of its business;
 - d. Establish the time for holding the regular meetings;
 - e. Reaffirm or adopt a new reasonable method for the public to determine the time and place of all regularly schedule meetings and the time, place and purpose of all special meetings.
- E. Special meetings may be called. At least twenty-four hours advance notice will be given to the news media that have requested notification, except in the event of an emergency requiring immediate official action. In the event of an emergency, news media that have requested notification will be notified immediately of the time, place and purpose of the meeting.
- F. No business shall be transacted that does not come within the purpose of purposes set forth in the call for the special meeting unless all members of the Board are present and agree to the consideration of the additional item.
- G. A majority of the Board shall constitute a quorum. Meetings of the Board shall be held in compliance with the requirements of Section 121.22 of the Ohio Revised Code (Ohio Open Meetings Act).
- H. Executive session is permitted per ORC 121.22 for any of the following purposes:
 - 1. To consider the appointment, employment, dismissal, discipline, promotion, demotion or compensation of a public employee or service recipient or the investigation of charges or complaints against such an individual, unless the public employee or service recipient requests a public hearing.
 - 2. To consider the purchase of property for public purposes, the sale of property at competitive bidding, or the sale of or other disposition of unneeded, obsolete, or unfit-

- for-agency-use property in accordance with ORC Section 505.10, if premature disclosure of information would give an unfair advantage to a person whose personal, private interest is adverse to the general public interest.
3. Details relative to security arrangements and emergency response protocols for a public body or public office, if disclosure of the matters discussed could reasonably be expected to jeopardize the security of the public body or public office.
 4. Matters required to be kept confidential by federal law or regulations, or state statutes.
 5. Preparing for, conducting, or reviewing negotiations or bargaining sessions with public employees concerning their compensation or other terms or conditions of employment.
 6. Conferences with an attorney for the public body concerning disputes involving the public body that are the subject of pending or imminent court action.
- I. Executive sessions will meet the following requirements:
1. An executive session will be held only as a part of a regular or special meeting of the Board or a sub-committee of the Board.
 2. To enter executive session, a motion must be made and approved by a majority of a quorum via roll call vote. The motion to hold the executive session shall state which one or more of the approved purposes listed above will be discussed, but need not include the name of any person to be discussed.
 3. It will be reelected in the minutes of the regular, special or sub-committee meeting that an executive session was held and the general subject matter of the session.
 4. In accordance with law, no official action may be taken in executive session. To take final action on any matter discussed, the Board will reconvene in open session. A resolution, rule, or formal action of any kind is invalid unless adopted in an open meeting of the public. A resolution, rule, or formal action adopted in an opening meeting that results from deliberations in a meeting not open to the public is invalid unless the deliberations were for a purpose specifically listed as suitable for executive session and the executive session was held in compliance with ORC Section 121.22.
 5. The Board may invite staff members, in addition to the superintendent, or others, to attend executive sessions at its discretion. No participant in executive session will disclose the details of the discussion, unless otherwise determined by the Board.
 6. The Board will not hold an executive session for the discipline of one of its members for conduct related to the performance of his/her official duties or for his/her removal from office.
- J. The president of the board or a majority of the members may extend to visitors the privilege of addressing the board per the Public Participation Policy.
- K. The news media or any person can request advance notice of special meetings or meetings at which particular public business is discussed.
- L. In-service training sessions are not considered a regularly scheduled meeting.

Policy adopted pursuant to 121.22 and 5126.029 of the Ohio Revised Code.

Revised: 8/13/19, 5/8/18

Adopted: 2/21/06

PUBLIC PARTICIPATION POLICY

- A. In accordance with ORC 121.22, all meetings of the Board will be open to the public. As public participation is not legally mandated, allotting time for it on regular meeting agendas is a courtesy the Board extends to its stakeholders.
- B. In order for the Board to fulfill its obligation to complete the planned agenda in an effective and efficient fashion, a maximum of 15 minutes of public participation will typically be permitted at each regular meeting. Speakers addressing the Board will be have three (3) minutes to speak per topic.
- C. The period of public participation may be extended by an affirmative vote by the majority of the Board. Each person addressing the Board will give his/her name and address for the record.
- D. The Board will not respond or answer questions during the public comment portion of the meeting.
- E. Complaints regarding services, staff or other administrative decisions will only be handled through the appropriate complaint resolution and/or grievance process already in place.
- F. Agendas will be distributed to all those who attend Board regular meetings. Each agenda will include information outlining the Board's policy of public participation at meetings.

Ref.: ORC 121.22

Revised: 9/14/21

Revised: 8/13/19

Adopted: 5/8/18

MINUTES OF MEETINGS

A. Preparation

In accordance with ORC Section 121.22 the minutes of a regular or special, or subcommittee meeting of the Board shall be promptly prepared, filed and maintained, and shall be open to public inspection. The minutes need only reflect the general subject matter of discussion in executive sessions authorized under applicable sections of ORC 121.22 Division (G).

B. Storage

The originals of the minutes shall be retained in an easily accessible manner in the Board's Administrative Offices.

Original, signed Resolutions of the Board shall be kept with the original minutes.

C. Certification

The Board's Recording Secretary shall certify the original copy as being true, correct and exact once they are approved by the Board as a whole.

D. Distribution

1. Copies of the minutes shall be prepared promptly after each meeting and shall be distributed to the Superintendent and to the Board members.
2. Copies of minutes and all public records may be obtained by an individual at a charge established by the Board in the Public Records Policy.

E. Approval

The minutes of the preceding meeting(s), with any changes made by a motion properly made and carried, or as directed by the President without objection, shall be approved by the Board and signed by the Recording Secretary as the first act of each regular meeting.

F. Custody and Availability

The official minutes and related documents of the Board shall be permanently filed in the Board's Administrative Offices and shall be made available to any one desiring to examine them during normal work hours.

Revised: 5/8/18

Adopted: 2/21/06

AUTHORITY OF MEMBERS

- A. The Board acts only as a body, at public meetings, in decisions openly arrived at and formally recorded.
- B. Board members have authority only when acting as a Board legally in session. The Board shall not be bound in any way by any statement or action on the part of any individual Board member or staff, except when such statement or action is in pursuance of specific instructions by the Board.

Revised: 8/13/19, 5/8/18

Adopted: 2/21/06

ORDER OF BUSINESS AND CONDUCT OF ORDER

A. Transaction of Business – Voting

1. The Board shall adopt rules for the conduct of its business and a record shall be kept of Board proceedings, which shall be open for public inspection at the Administrative Offices.
2. Voting may be by roll call or a voicing of ‘yeas’ and ‘nays’. The vote shall be taken down and entered into the records of the proceedings of the Board. For a motion or resolution to pass, a majority of the members present must vote “yea”.
3. A motion to enter into executive session must be by roll call vote.
4. If a member abstains from voting, the abstention is not a vote, and is not counted as a vote. The action will pass or fail based upon the votes cast by the other members present.

B. Quorum

1. A majority of the Board shall constitute a quorum for the transaction of business and approval of a motion or resolution. The president may vote on all matters.
2. Where a quorum is present, several members’ refusal to vote is not sufficient, even if a majority, to defeat the action of those actually voting.
3. Members present, including the president, are obligated to vote unless they wish to be regarded as assenting to the decision of the voluble majority.
4. EXCEPTION: If a Board member does not vote because of a conflict of interest, the absence of a vote cannot be counted as affirmative.
5. At a meeting of the full board, four of seven members being present shall constitute a quorum for the transaction of business and approval of a motion or resolution. The President may vote on all matters.
6. At a meeting of a sub-committee, a majority of the members being present shall constitute a quorum for the committee to hold a meeting and approve recommendations to make to the Board.

C. Agenda

The Superintendent shall prepare and send a copy of the agenda to the members of the Board no later than five days prior to any regular Board meeting. The Superintendent in consultation with the Board President shall prepare a final agenda for each meeting of the Board. The order of business at each meeting shall be:

1. Roll call, introductions
2. Agenda

3. Minutes (vote to approve)
4. Financial report and expenses (vote to approve)
5. Superintendent's report
6. Committee Reports (if applicable)
7. Old Business
8. New Business
9. Miscellaneous
10. Comments from the floor
11. Adjournment

Revised: 8/13/19, 5/8/18

Adopted: 2/21/06

COMMITTEES OF THE BOARD

- A. The Board shall authorize the formation of special committees such as a finance and/or personnel committee to review important and/or time consuming issues. The chairs and members of each committee shall be appointed by the president. A special committee shall report its recommendations to the full board for appropriate action.
- B. An Ethics Council is to be appointed annually, either as a separate committee, or the Board (see Ethics Council Policy). Other committees may include Personnel, Finance, Policy, and Facilities.
- C. Special ad-hoc committees may also be formed for specific purposes.
- D. All board committee meetings and ad-hoc committee meetings are considered public meeting, with the exception of Executive Session, and subject to public notice requirements as outlined in the Public Notice of Meetings Policy, and Order of Business – Transaction of Business Policy.

Revised: 8/1/19
Adopted: 2/21/06

PUBLIC NOTICE

A. Public Notice of Regular, Committee and Organization Meetings

1. Public notice of all meetings of the Board shall be given in accordance with Section 121.22 of the Ohio Revised Code.
2. Notice of all meetings shall be posted on the agency website, and at the program facilities in conspicuous places in areas accessible to the public during usual business hours.
3. The Superintendent, or designee, shall post a statement of the time(s) and place(s) of regular meetings of the Board for each regular meeting of the calendar year. The Superintendent, or designee, shall check at reasonable intervals to ensure that the statement remains posted during the calendar year. If at any time during the calendar year, the time or place of regular meetings or of any regular meeting is changed on a permanent or temporary basis, a statement of such shall be posted by the Superintendent, or designee, at least 24 hours before the time of the first changed regular meeting.
4. The Superintendent, or designee, shall post a statement of the time and place of the annual organizational meeting of the Board at least 24 hours before the time of such organizational meeting.
5. All generally recognized local news media will be notified of the Board's regular meeting schedule for the calendar year following the annual organization meeting.
6. Upon the recess of any regular or special meeting to another day, the Superintendent or designee, shall promptly post notice of the time and place of the meeting is to reconvene.

B. Public Notice of Special Meetings

1. Except in the case of an emergency requiring immediate official action, the Superintendent, or designee, shall, no later than 24 hour before the start of a special meeting of the Board, post a statement of the time and place of the special meeting.
2. The posted notices of a special meeting shall state the specific or general purposes to be consider at the special meeting.
3. All postings for special meetings shall be done in the same place as those postings for regular and organizational meetings.
4. In addition to the postings required, the Superintendent shall cause to be published once, no later than 24 hours prior to the time of a special meeting of the Board, a statement of the time, place and purposes(s) of the special meeting. Such publication shall be done in a newspaper of general circulation as defined by Ohio Revised Code Section 7.12.

C. Notices to News Media of Special Meetings

1. According to ORC Section 121.22, any news medium organization that desires to be given advance notification of special meetings of the Board shall file with the Superintendent a written request thereof.

“A public body shall not hold a special meeting unless it gives at least twenty-four hours advance notice to the news media that have requested notification, except in the event of an emergency requiring immediate official action. In the event of an emergency, the member or members calling the meeting shall notify the news media that have requested notification immediately of the time, place, and purpose of the meeting.”

2. News media requests for such advance notification of special meetings shall specify:
 - a. The name of the medium;
 - b. The name and contact information of the person to whom written notifications to the medium may be communicated; and
 - c. The preferred mode of communication.
 - d. In the event that no medium has a request on file, the Superintendent or designee, will attempt to communicate the time, place and purpose of the special meetings to at least one recognized local medium a minimum of 24 hours in advance, in the interest of due diligence.

D. Notification of Specific Individuals of Regular, Special and Organizational Meetings

ORC Section 121.22 (F) states: “...any person may, upon request and payment of a reasonable fee, obtain reasonable advance notification of all meetings at which any specific type of public business is to be discussed.”

1. Such person must file a written request with the Superintendent’s Office specifying the person’s name, address and telephone numbers at or through which he can be reached during and outside of business hours and specify the preferred method of communication.
2. Such request shall be valid for a 12-month period at which time a new request must be made. Such requests may be modified or extended only by filing a new request with the Superintendent. A request shall not be deemed to be made unless it is complete in all respects.
3. The contents of written notification under this section shall be a copy of the agenda of the meeting. Written notification under this section may be accomplished by giving advance written notification, by copies of agendas, of all meetings of the Board.

E. Miscellaneous Rules Pertaining to Notifications Processes

1. A reasonable attempt at notification shall constitute notification in compliance with this policy.

2. The Superintendent/designee shall maintain a record of the date and manner of all actions taken with regard to notices and notifications and shall retain copies of proofs of publication of any notifications or notices published, if available.
3. Notice of regularly scheduled meetings of Board sub-committees shall be given following the process for special board meetings.

Revised: 8/13/19

Adopted: 2/21/06

BOARD MEMBER CODE OF ETHICS

A. Definitions

1. Anything of Value (Ref.: ORC 1.03, 102.01 and 3517.01) – includes:
 - a. Money, bank bills or notes, United States treasury notes, and other bills, bonds, or notes issued by lawful authority and intended to pass and circulate as money;
 - b. Goods and chattels;
 - c. Promissory notes, bills of exchange, orders, drafts, warrants, checks, or bonds given for the payment of money;
 - d. Receipts given for the payment of money or other property;
 - e. Rights in action;
 - f. Things which savor of the realty and are, at the time they are taken, a part of the freehold, whether they are of the substance or produce thereof or affixed thereto, although there may be no interval between the severing and taking away;
 - g. Any interest in realty, including fee simple and partial interests, present and future, contingent or vested interest, beneficial interests, leasehold interests, and any other interest in realty;
 - h. Any promise of future employment;
 - i. “Contribution” meaning a loan, gift, deposit, forgiveness of indebtedness, donation, advance, payment, or transfer of funds, including a transfer of funds from an *inter vivos* or testamentary trust or decedent's estate, and the payment by any person other than the person to whom the services are rendered for the personal services of another person, which contribution is made, received, or used for the purpose of influencing the results of an election.

Any loan, gift, deposit, forgiveness of indebtedness, donation, advance, payment, or transfer of funds, including a transfer of funds from an *inter vivos* or testamentary trust or decedent's estate, and the payment by any campaign committee, political action committee, legislative campaign fund, political party, political contributing entity, or person other than the person to whom the services are rendered for the personal services of another person, that is made, received, or used by a state or county political party, other than moneys a state or county political party receives from the Ohio political party fund pursuant to Section 3517.17 of the Revised Code and the moneys an entity may receive under Sections 3517.101, 3517.102, and 3517.1013 of the Revised Code.
 - j. Every other thing of value.
2. Compensation – Money, thing of value or financial benefit. “Compensation” does not include reimbursement for actual and necessary expenses incurred in the performance of official duties. (Ref.: ORC 102)

3. Immediate Family – When used in parts of this policy based on ORC 102, “Immediate Family” means a spouse residing in the person’s household and any dependent child.

For parts of this policy based on ORC 5126 and OAC 5123, “Immediate Family” means parents, grandparents, brothers, sisters, spouses, sons, daughters, aunts, uncles, mothers-in-law, fathers-in-law, brothers-in-law, sisters-in-law, sons-in-law, and daughters-in-law.

4. Honorarium – Any payment made in consideration for any speech given, article published, or attendance at any public or private conference, convention, meeting, social event, meal, or similar gathering.

Honorarium does not include ceremonial gifts or awards that have insignificant monetary value; unsolicited gifts of nominal value or trivial items of informational value; or earned income from any person, other than a legislative agent, for personal services that are customarily provided in connection with the practice of a bona fide business, if that business initially began before the public official conducting that business was appointed to office. (Ref.: ORC 102)

5. Ministerial Functions – Includes, but is not limited to the filing or amendment of tax returns, applications for permits and licenses, incorporation papers and other documents. (Ref.: ORC 102.04)

6. "Public contract" means (Ref.: ORC 102):

- a. The purchase or acquisition, or a contract for the purchase or acquisition, of property or services by or for the use of the state, any of its political subdivisions, or any agency or instrumentality of either, including the employment of an individual by the state, any of its political subdivisions, or any agency or instrumentality of either;
- b. A contract for the design, construction, alteration, repair, or maintenance of any public property.

7. Public official - any person who is elected or appointed to an office of any public agency. (Ref.: ORC 102) For this policy, it means a member of the Lawrence County Board of DD.

C. Prohibited Actions

1. Participation by a board member in a matter involving a conflict of interest

In no circumstance shall a member of a county board of developmental disabilities participate in or vote on any matter before the county board concerning a contract agency of which the member or an immediate family

member of the member is also a board member or an employee. (Ref.: ORC 5126.0212)

2. Accepting compensation for the performance of or for conducting County Board business.

1. Other than that allowed by ORC 102.03, or other provisions of law, no board member shall solicit or accept any compensation to perform his/her official duties, to perform any other act or service in within his/her public capacity, for the general performance of the duties of the his/her office. (Reference ORC 2921.43) This includes:

For the Board Member's own personal or business use, soliciting or accepting anything of value in consideration of:

- a. Appointing or securing, maintaining or renewing the appointment of any person to any public office, employment or agency;
 - b. Preferring, or maintaining the status of, any public employee with respect to compensation, duties, placement, location, promotion or other material aspects of employment.
2. For the benefit of a political party, campaign committee, legislative campaign fund, political action committee or political contributing entity, no Board Member shall coerce any contribution in consideration of:
- a. Appointing or securing, maintaining or renewing the appointment of any person to any public office, employment or agency;
 - b. Preferring, or maintaining the status of, any public employee with respect to compensation, duties, placement, location, promotion or other material aspects of employment.
3. Members of a county board of developmental disabilities shall be reimbursed for necessary expenses incurred in the conduct of county board business, including expenses incurred in the member's county of resident in accordance with an established policy of the Board. (Ref.: ORC 5126.028) See policy on expenses reimbursement.

C. Disclosure of confidential information

No present or former Board Member shall disclose or use, without appropriate authorization, any information acquired by the Board Member in the course of the Board Member's official duties that is confidential because of statutory provisions, or that has been clearly designated to the Board Member as confidential when that confidential designation is warranted because of the status of the proceedings or the circumstances under which the information was received and preserving its confidentiality is necessary to the proper conduct of government business. (Ref.: ORC 102.03)

D. Participation within the scope of official duties in any prohibited license or rate-making proceeding. (Ref.: ORC 102.03)

E. Improper use of authority or influence of office

No public official shall use or authorize the use of the authority or influence of office to secure anything of value, or the promise or offer of anything of value, that will create substantial improper influence upon the public official in the performance of his/her duties. (Ref.: ORC 102.03)

F. Accept or seek something of value resulting in improper influence

No Board Member shall solicit or accept anything of value that will manifest a substantial improper influence upon the Board Member in the performance of his/her duties (Ref.: ORC 102.03)

G. Having an unlawful interest in a public contract as defined in ORC 2921.42

H. Representation

No present or former public official shall, during public service or for twelve months thereafter, represent a client or act in a representative capacity for any person on any matter in which the public official participated as a public official through decision, approval, disapproval, recommendation, the rendering of advice, investigation, or other substantial exercise of administrative discretion.

Revised: 8/13/19

Adopted: 2/21/06

COMPENSATION: EXPENSES OF BOARD MEMBERS

Per Section 5126.028 of the Revised Code, members of the Board shall serve their term without compensation, but shall be reimbursed for necessary expenses in the conduct of Board business, including those incurred within the county of residence in accordance with established Board policy.

Revised: 8/13/19
Adopted: 2/21/06

ETHICS COUNCIL

A. Purpose

The Board has created an Ethics Council in accordance with ORC Section 5126.031 to review all direct services contracts.

B. Definitions

Direct Services Contract - any legally enforceable agreement with an individual, agency or other entity that, pursuant to its terms or operation, may result in a payment from the Board to an eligible person or to a member of the immediate family of an eligible person for services rendered to the eligible person. Direct services contracts will include but not be limited to Supported Living and Family Support Services (if payments are made directly to the family).

1. Eligible Person – a person eligible to receive services from a county board or from an entity under contract with a county board
2. Former Board Member – a person whose service on the county board ended less than one year prior to commencement of services under a direct services contract.
3. Former Employee – a person whose employment by the board ended less than one year prior to commencement of services under a direct services contract.
4. Immediate Family – (in this policy only) parent, grandparent, brother, sister, spouse, son, daughter, aunt, uncle, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law and daughter-in-law.

C. Policy

1. Members

At the organizational meeting and annually thereafter the President of the Board shall appoint three members of the Board to the Ethics Council.

- a. The President may be one of those appointed.
- b. The Superintendent shall be a non-voting member of the Council.
- c. The Chairperson shall not appoint a board member to the Ethics Council if the member, or any member of his/her family, will have any interest in any direct services contract under review by the Council while the member serves on the Council or during the twelve month period after completion of his/her Council service.
- d. If a Council member or a member of the Council member's immediate family has or will have such an interest, the President shall replace the member by appointing another board member to the Council.

D. Functions

The role of the Ethics Council shall be:

1. To review all direct service contracts which may result in direct payment to an eligible person or to a member of the eligible person's family according to this policy; and
2. To develop and recommend, in consultation with the prosecuting attorney, to the Board policies regarding ethical standards, contract audit procedures and grievance procedures with respect to the award and reconciliation of the direct services contract.

E. Meeting Protocols

1. The Ethics Council shall meet regularly, or as directed by the Board to perform its functions.
 2. Any action taken by the Ethics Council shall be in public.
 3. The Council shall afford the affected party the opportunity to meet with the Ethics Council on matters related to a direct services contract or any action taken by the Council.
 4. Official minutes will be taken at all Ethics Council meetings and shall be part of the public records of the Board.
4. All contracts and information provided to the Ethics Council shall be sent by the Superintendent or his/her designee, with appropriate certification.

Revised: 8/13/19

Adopted: 2/21/06

REMOVAL OF BOARD MEMBERS

- A. It shall be the policy of the Board to notify the Lawrence County Board of County Commissioners or Probate Judge when a Board member should be removed from the Board for any of the reasons listed in ORC 5126.0213.
- B. The Board may pass a resolution urging the appointing authority to request that the DODD issue a waiver of the requirement that the member be removed. The member whose absences from the sessions or meetings are at issue may not vote on the resolution. The appointing authority may request the waiver regardless of whether the Board adopts the resolution.
- C. In the event of a mandatory removal of a Board member under this policy, Board shall supply the board member and the member's appointing authority with written notice of the grounds.
- D. A Board members may request a hearing on the proposed removal and shall not be removed from the Board before the conclusion of the hearing.
- E. A member of the Board who is removed is ineligible for reappointment to the board for at least one year. The appointing authority shall specify the time during which the member is ineligible for reappointment. If the member is removed under division (A)(5) of ORC 5126.0213, the Board shall specify the training the member must complete before being eligible for reappointment.

Reference: ORC 5126.0213 - 5126.0218

Revised: 8/13/19

Adopted: 2/21/06

Lawrence County Developmental Disabilities

Policy 1.18 - REMOTE BOARD MEMBER PARTICIPATION

A. Background

Sec. 5126.0223 of the Revised Code allows, beginning 10/3/2023, any county board of developmental disabilities to permit its members to attend and participate in meetings of the county board via means of electronic communication.

This section requires the adoption of a board policy which establishes certain minimum standards which must be observed to remain in compliance with the requirements of Sec. 121.22 of the Revised Code (Ohio's open public meetings law). All existing policies regarding public notice and preservation of records shall remain in place.

B. Policy

1. A member of the board may attend a meeting of the board or a meeting of a committee of the board via means of electronic communication if all of the following apply:

- The means of electronic communication permits board members attending the meeting via means of electronic communication, board members present in person at the place where the meeting is conducted, and all members of the public present in person at the place where the meeting is conducted to simultaneously communicate with each other during the meeting; and
- At least one-third of the members attending the meeting are attending in person at the place where the meeting is conducted, as referenced in the table below; and

2. In the case of a regular meeting of the board, the member attending the meeting via means of electronic communication attends at least one-half of the annual regular meetings of the board in person at the place where the meeting is conducted; and

3. The member attending the meeting via means of electronic communication notified the president of the board of their intent not less than 48 hours before the meeting, except in the case of declared emergency; and

4. All votes taken at the meeting are taken by roll call vote. Any board member attending a meeting of the board or a meeting of a committee of the board via electronic means is considered present at the meeting, is counted for purposes of establishing a quorum, and may vote at the meeting.

For purposes of determining whether one-third of members are attending a meeting of the board or a committee meeting of the board in person, the following table can be used as a guide:

C. Number of Meeting Participants In-Person Attendance Required

2 total 1 in-person
3 total 1 in-person
4 total 2 in-person
5 total 2 in-person
6 total 2 in-person
7 total 3 in-person

For purposes of determining how many meetings a board member must attend in person – the Lawrence County DD board meets 11 times per year, so:

Board members must attend 6 meetings in person

POLICY ADOPTION AND CHANGES

- A. The Board maintains authority to amend, revise, delete or add to these policies at any time, with or without prior notice. The Board shall consider policy drafts suggested by the Superintendent, or will adopt policy through its own volition. Policy is adopted by a majority vote of a quorum of the Board.
- B. The Superintendent may identify the need to initiate policy changes based upon changes in legislation or operations, and for other reasons. The Superintendent will draft a copy of the change, and will submit it to the Board for review, discussion and consideration for adoption. Likewise, directors, managers and other employees may recognize the need for policy changes, and are encouraged to recommend such changes to the Superintendent. The Superintendent will consider the merit of the policy change, and maintains authority to determine if it should be presented to the Board for consideration for approval. All policy changes proposed by staff must be submitted through the Superintendent, and not directly to the Board.
- C. When the Board approves a policy change, the Superintendent will ensure that the new or revised policy is communicated to affected employees, prior to the policy change effective date, if feasible. Policy revisions, additions, amendments or deletions will be sent to employees who will be required to sign that they received the notification.
- D. The Board itself will formulate and adopt policies only when required by law and when the Superintendent recommends Board adoption in light of strong community attitudes or probable staff reaction.
- E. The Board delegates to the Superintendent the function of specifying required actions and designing the detailed arrangements under which the programs will be operated. Those regulations and detailed arrangements will constitute the procedures governing the program. They must be consistent with the policies adopted by the Board in every respect.
- F. All policies will be reviewed annually by the Superintendent and administrative team members.

Revised: 8/13/19

Adopted: 2/21/06

GIFTS, GRANTS AND BEQUESTS

- A. In accordance with ORC 5126.05 (F), the Lawrence County Developmental Disabilities may receive or dispose of a gift, grant, or bequest, according to the terms of the gift, grant, or bequest.
- B. All money received by gift, grant, or bequest shall be deposited in the treasury to the credit of the Agency and shall be available for use by the Agency for the purposes determined or stated by the owner or grantor. The Agency shall utilize the same procedure for earnings or interest accruing from a gift, grant or bequest.
- C. Any person or organization desiring to give a gift, or make a grant or a bequest to the Board, shall contact the Superintendent.
- D. Solicitation of any gift or donation by employees or volunteers shall have prior approval of the Superintendent or designee.
- E. The Superintendent shall be advised of any gifts, grants or bequests so a record can be maintained and an acknowledgement be sent.

Revised: 8/13/19

Adopted: 2/21/06

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 2.03 - CONTRACTS

- A. Lawrence County Developmental Disabilities (LCDD) may enter into contracts with any other board, agency, or organization to provide the facilities programs, services, and supports authorized or required upon such terms as may be agreeable, and in accordance with ORC Chapter 3323 and 5126 and rules adopted there under. Exceptions are set forth in ORC 5126.33.
- B. Every contract entered into by LCDD must be reduced in writing and formally executed. It should be clear and definite regarding each item, including the duties of all parties, the amount of each payment to be made (or the basis upon which each payment is to be calculated), the total amount to be expended under the contract, any preconditions to payment and the time at which payments are to be made. If any other documents, programs, or plans are incorporated by reference into the contract, they should be clearly identified, and if they cannot be attached to the contract, their location should be clearly stated in the contract.
- C. All contracts should be approved as to form by the LCDD's legal advisor (County Prosecutor). If it proves impractical to have contracts approved individually, consideration should be given to preparation of a standard contract, approved by LCDD's legal advisor, which may be used in most instances. Deviations from this standard contract may then be approved by the legal advisor on an individual basis.
- D. The contract must be signed by authorized representatives of all parties to the contract. The Superintendent is authorized by the Board to sign contracts on the Board's behalf, in accordance with the approved budget. An executed copy of the contract should be retained by all parties.
- E. Direct service contracts shall comply with ORC sections 5126.03-5126.034, and be reviewed by the Board's Ethics committee when necessary. The services should be outline in individual's ISP's/ISFP's.
- F. All contracts will be monitored regularly by members of the administrative team, as applicable to specific programs, to assure compliance, quality, need and cost effectiveness.
- G. All service contract shall meet the requirements as specified in ORC sections 5126.03 – 5126.034.

Revised: 08/15/22

Revised: 8/13/19

Adopted: 2/21/06

COMMUNICATIONS AND PUBLIC RELATIONS

- A. The Lawrence County-Developmental Disabilities shall utilize a centralized response in all matters of communication and public relations. This includes routine and no-routine media inquiries, other external communications and public relations.
- B. The Superintendent is the official spokesperson for the agency, and will delegate responsibilities as deemed appropriate. All communications or public relations efforts of the agency shall be coordinated by the Superintendent, or a designee as directed by the Superintendent.
- C. The centralized response shall incorporate all agency programs or affiliated programs, individuals served in the community, and their families/guardians, providers, volunteers, and the community-at-large.
- D. Procedures shall be developed for routine and non-routine inquiries, communications and public relations.
- E. At all times, compliance with Board policies regarding individual's rights, confidentiality and use and disclosure of protected health information shall be maintained. Information concerning students or individuals served for any purpose not directly related to service delivery or administration of services shall not be disclosed.
- F. Photo releases will be obtained prior to any publication that includes an individual served.

Revised: 8/13/19, 2/21/06
Adopted: 01/04

VOLUNTEER SERVICES

- A. The Agency shall encourage the use of qualified trained volunteers in appropriate program areas and include volunteers as an integral part of overall service delivery.
- B. Volunteers shall not be used to replace regular staff or be considered in the calculation of staffing ratios.
- C. All requirements regarding volunteer management and terms is located in LCDD Personnel Policy Manual 19.01 – Volunteers.

Revised: 8/13/19, 2/21/06

Adopted: 1/04

RECORDS RETENTION

- A. The Lawrence County Board of Developmental Disabilities shall develop written procedures to identify the duration of time each type of record shall be maintained by the agency. The LCBDD will also identify who is responsible for maintaining and retaining those records.
- B. Each program of the Board shall be responsible for the development and maintenance of a records retention schedule for program specific records, including case records of individuals served.
- C. The types and locations of records maintained that shall be made available to the individual or parent of a minor or guardian are as follows:
 - 1. Early Intervention Records – located at the Early Childhood Center in South Point
 - 2. Pre-School Education Records – located at the Early Childhood Center in South Point
 - 3. School Age Education Records – located at the Open Door School
 - 4. Service and Support Records – located in the Service and Support Administration Offices.
- D. Board Administration shall be responsible for development and maintenance of a records retention schedule for administrative nature, personnel and finance records, and records that cross divisions.
- E. Records retention schedules shall include identification of the contents of the file and the length of time for retention of the file. A process for moving records from an active or working file to permanent storage shall be identified, as well as the location of the files.
- F. Record retention schedules shall be reviewed annually by the identified division for compliance with new rules or standards.
- G. Record retention schedules shall conform to requirements of the Ohio Historical Society, which is charged with the legal responsibility for promulgating record retention schedules, and the Lawrence County Records Commission as stipulated in ORC 149.38(A) and ORC 149.38(B).
- H. The Board shall also comply with all relevant federal and state mandates and accrediting bodies: Medicaid – Ohio Departments of DD, Jobs & Family Services, Education, Rehabilitation Services Commission, OSHA, Department of Labor, and Bureau of Workers Compensation.
- I. Confidentiality of information shall be maintained by staff. Each division shall be responsible for assuring that only those staff with a legitimate program or business reason to access the information will be permitted access.
- J. Destruction of records is the responsibility of each program and will be conducted on the basis of the relevant record retention schedule, with the approval of the Lawrence County Records Commission. Prior to the destruction of any records, the Board shall send a letter of Intent to Destroy Information to the individual served or his/her guardian. The letter shall be delivered in person or sent via certified mail service, request written consent and specify which records are

targeted for destruction. The individual or his/her legal guardian may request copies of all, some or none of the information to be destroyed. If no response is received within 30 days, destruction of the targeted records will occur, following approval of the Lawrence County Records Commission. Letters of Intent will be kept as permanent records.

- K. Upon an individual's death, files will be identified as "deceased" and marked with a date for destruction. This destruction will be seven years after the last Medicaid service or six years after completion of a Medicaid audit of that service, whichever date is later. Unless there is a pending investigation or litigation, destruction of the file will occur at that time, with the approval of the Lawrence County Records Commission. The Ohio Revised Code specifies the release of records of deceased individuals to family members/guardians.

Revised: 8/13/19, 2/21/06
Adopted: 3/16/04

PUBLIC RECORDS ACCESS

- A. Lawrence County DD, in accordance with the Ohio Revised Code 149.43, defines records as including the following: Any document; paper, electronic (including, but not limited to e-mail), or other format that is created or received by, or comes under the jurisdiction of a public office that documents the organization, functions, policies, decisions, procedures, operations, or other activities of the office. All records of the board are public unless they are specifically exempt from disclosure under the Ohio Revised Code.
- B. It is the policy of the board that, as required by Ohio law, records shall be organized and maintained so that they are readily available for inspection and copying. Record retention schedules are to be updated regularly and posted prominently.
- C. Each request for public records shall be evaluated for a response using the following guidelines:
 - 1. Although no specific language is required to make a request, the requester must at least identify the records requested with sufficient clarity to allow the public office to identify, retrieve, and review the records. If it is not clear what records are being sought, the records custodian must contact the requester for clarification, and should assist the requestor in revising the request by informing the requestor of the manner in which the office keeps its records.
 - 2. The requester does not have to put a records request in writing and does not have to provide his or her identity or the intended use of the requested public record.
 - 3. Public records are to be available for inspection during regular business hours, with the exception of published holidays. Public records must be made available for inspection promptly. Copies of public records must be made available within a reasonable period of time. "Prompt" and "reasonable" take into account the volume of records requested; the proximity of the location where the records are stored; and the necessity for any legal review of the records requested.
 - 4. Each request should be evaluated for an estimated length of time required to gather the records. Routine requests for records should be satisfied immediately if feasible to do so. Routine requests include, but are not limited to, meeting minutes (both in draft and final form), budgets, salary information, forms and applications, personnel rosters, etc. If fewer than 20 pages of copies are requested or if the records are readily available in an electronic format that can be e-mailed or downloaded easily, these should be made as quickly as the equipment allows. (If more copies are requested, an appointment should be made with the requester on when the copies or computer files can be picked up.) All requests for public records must either be satisfied or be acknowledged in writing by the Board within three business days following the office's receipt of the request. If a request is deemed significantly beyond "routine," such as seeking a voluminous number of copies or requiring extensive research, the acknowledgement must include the following:
 - a. An estimated number of business days it will take to satisfy the request.

- b. An estimated cost if copies are requested.
 - c. Any items within the request that may be exempt from disclosure.
- D. Any denial of public records requested must include an explanation, including legal authority. If portions of a record are public and portions are exempt, the exempt portions are to be redacted and the rest released. If there are redactions, each redaction must be accompanied by a supporting explanation, including legal authority.
- E. Those seeking public records shall be charged only the actual cost of making copies. Payment shall be made in advance.
 - 1. The charge for paper copies is 25 cents per page.
 - 2. The charge for downloaded computer files to a USB drive is actual cost of drive.
 - 3. There is no charge for documents e-mailed.
- F. Requesters may ask that documents be mailed to them. They will be charged the actual cost of the postage and mailing supplies.
- G. Documents in electronic mail format are records as defined by the Ohio Revised Code when their content relates to the business of the office. E-mail is to be treated in the same fashion as records in other formats and should follow the same retention schedules.
- H. Records in private e-mail accounts used to conduct public business are subject to disclosure, and all employees or representatives of this office are instructed to retain their e-mails that relate to public business and to copy them to their business e-mail accounts and/or to the office's records custodian.
- I. The records custodian is to treat the e-mails from private accounts as records of the public office, filing them in the appropriate way, retaining them per established schedules and making them available for inspection and copying in accordance with the Public Records Act.
- J. The board recognizes the legal and non-legal consequences of failure to properly respond to a public records request. In addition to the distrust in government that failure to comply may cause, The board's failure to comply with a request may result in a court ordering The board to comply with the law and to pay the requester attorney's fees and damages.

ELECTRONIC SIGNATURE

- A. Electronic signature, an automated function which replaces a handwritten signature with a system generated statement, shall be utilized for records as a means for authentication of transcribed documents, computer generated documents and/or electronic entries. System generated electronic signatures are considered legally binding as a means to identify the author of record entries and confirm that the contents are what the author intended.
- B. Authorized employees shall be allowed to utilize electronic signature in accordance with this policy, State and Federal regulations regarding such, and developed and corresponding procedures.

Adopted: 2/15/11

POLICY 2.10

DOCUMENT IMAGING

- A. Board records, including records of individual's served and personnel records, shall be electronically transferred to a paperless document imaging system.
- B. Authorized employees shall be permitted to utilize document imaging in accordance with this policy, State and Federal regulations regarding such, and developed and corresponding procedures.

Adopted: 10/18/11

FISCAL

- A. Ohio statute designates that the Lawrence County Board of County Commissioners shall be the fiscal agent of that county's Board of Developmental Disabilities. Therefore, the Board shall adhere to the fiscal management requirements of the Lawrence County Board of County Commissioners in all matters except those for which the Board is granted authority under other sections of the Ohio Revised Code (ORC).
- B. The Board shall by resolution adopt a budget and authorize expenditures for the purposes outlined in chapter 5126 of the Ohio Revised Code and do so in accordance with ORC section 319.16.
- C. The Board shall approve attendance of board members and employees at professional meetings and approve expenditures for attendance.
- D. The Board shall by resolution include in the budget the source of funds to pay the nonfederal share of Medicaid expenditures the board is required to pay for case management services (ORC 5126.059) and home and community-based services (ORC 5126.0510).
- E. In accordance with ORC section 9.38 public monies in excess of \$1,000 shall be deposited in the Lawrence County Treasury no later than the business day following the day of receipt. Daily receipts not exceeding \$1,000 must be made no later than three business days after receipt.
- F. Expenditures under \$5,000 will be at the discretion of the Superintendent.
- G. The approval process for expenditures between \$5,000 and \$50,000 will require a minimum of three letterhead quotes, if circumstances permit, and must be approved by the Board.
- H. Expenditures over \$50,000 will go through the bidding process in accordance with ORC 307.87, and:
 - 1. The Superintendent, or designee, will assemble the proper specifications and make the necessary arrangements for public bidding and price quotations;
 - 2. The Board of County Commissioners, or designee, will receive the bids and record them;
 - 3. The Superintendent will make his/her recommendation concerning the bids to the DD Board, and;
 - 4. Upon approval of the DD Board, he/she will submit the recommendation to the Board of County Commissioners. Upon its approval, the Superintendent, or designee, will process purchase orders to those bidders awarded the contracts and notify the other bidders of the results of the bidding.
- I. The Board shall submit to the Lawrence County Board of County Commissioners in accordance with the normal budget process and as part of its budget request, a list identifying the total expenditures projected for any of the following:
 - 1. Any membership dues of the members or employees of the county board, in any organization, association, or other entity;
 - 2. Any professional services of the county board, its members or employees, or both;

3. Any training of the members or employees of the county board.
- J. “Professional Services” means all of the following services provided on behalf of the Board, members or employees of a county board, or both:
1. Lobbying and other governmental affairs services;
 2. Legal services other than the legal services provided by a county prosecutor or provided for the purpose of collective bargaining;
 3. Public relation services;
 4. Consulting services;
 5. Personnel training services, not including tuition or professional growth reimbursement programs for county board members or employees.

Reference: ORC 5126.038

Revised: 9/10/19

Revised: 8/13/19

Adopted: 1/14/14

CREDIT CARDS AND ACCOUNTS

- A. The Superintendent and Business Manager may acquire, authorize and cancel store issued credit cards and accounts. The Business Manager will maintain, as a part of this policy, a list of credit accounts, with the following information:
 - 1. Positions authorized to use the card or account
 - 2. The type of expenses for which the card or account may be used
 - 3. The presentation instruments used to make purchases with the account (card, account number, etc.)
 - 4. The maximum credit limit
- B. The Fiscal Specialist shall serve as the Compliance Officer and shall not be an authorized user of the credit accounts or authorize the use of the credit card or account by an individual. The Compliance Officer must review with the Business Manager the following:
 - 1. The number of cards and accounts issued
 - 2. The number of active cards and accounts issued
 - 3. The cards' and accounts' expiration dates
 - 4. The cards' and account' credit limits
- C. No late charges or finance charges shall be an allowable expense unless authorized by the board of county commissioners.
- D. Purchases made with the Board credit cards and accounts shall be tax-exempt. The cardholder or authorized purchaser shall present the tax exemption certificate to the vendor and/or verification of employment with LCDD.

USE OF THE CREDIT CARD OR ACCOUNT MUST BE PRIOR APPROVED THROUGH THE BOARD PURCHASE ORDER REQUEST SYSTEM.

- E. A cardholder who incurs an expense on the credit card or account shall submit to the business office detailed receipts of the expenses incurred with their signature within three business days of the purchase.
- F. An employee who misuses such as incurs expenses on the credit card or account without prior approval or incurs an expense that does not meet this policy shall be personally liable to pay for the unauthorized expense and may be subject to disciplinary procedures.
- G. If a credit card is lost or stolen the responsible employee shall notify the Compliance Officer immediately who will then report the loss to the issuing store, the Business Manager and the Superintendent.

Revised: 9/10/19, 8/13/19, 10/18/16

Approved: 9/20/11

PAYER OF LAST RESORT

- A. The Lawrence County Developmental Disabilities (LCDD) supports the provision of services to as many eligible individuals as possible within the constraints of available resources. With limited funding available to serve new people, existing resources must be maximized to meet the needs of individuals and families eligible for services. This policy has been developed to ensure that local tax dollars from the general fund are used as the payer of last resort when other funding is available.
- ~~B.~~ HCBS waivers administered by LCDD allows the agency to support more individuals. When an individual is enrolled on a waiver, approximately 60% of the cost of the waiver services is reimbursed by federal funds, called the “federal financial participation” portion. Local tax dollars - known as the local “match” - fund 40% of the costs of these same services.

Therefore, the following parameters are in place to guide the distribution of local tax dollars from the general fund for service needs, and to maximize the use of other available funds.

1. Individuals shall utilize all available funding resources, including but not limited to private insurance, Medicaid state plan and HCBS waiver funding before requesting local tax dollars from the general fund.
2. Eligible individuals who choose not to apply for Medicaid state plan funding, or HCBS waiver funding, or is found to be ineligible but still wants to move ahead with services, will be required to pay the federal financial participation (FFP) portion of the total cost of such services (the approximate 60% of what Medicaid would have paid), or receive limited services (where the total cost does not exceed the approximate 40% that LCDD would have paid in local match funds).
3. However, if the assessed needs are minimal, and do not require the full scope of service options provided by the HCBS waiver, county tax levy dollars from the general fund may be approved at the discretion of the Superintendent based on fiscal considerations.
4. Opportunities for sharing HCBS waiver services, and housing, should be explored for all individuals based on assessed needs and within the parameters of all applicable waiver rules. Sharing services allows for resources to be directed towards serving more individuals, and improves future sustainability of services for people with developmental disabilities.
5. Additional local funding will not be available when the HCBS wavier budget has been exhausted for DD services. Individuals will be supported in choosing their services based on need and within their allocated budget amount.
6. The Superintendent may waive any requirements of this policy for a period of up to

one hundred and eighty (180) days for any person determined by the Superintendent to be in emergency need of services.

7. State and federal laws and rules shall take precedence over any contrary provisions of this policy.

Revised: 1/10/24
9/11/18

Adopted: 8/7/18

NON-RETALIATION FOR REPORTING FRAUD, WASTE, ABUSE AND OTHER VIOLATIONS

- A. Lawrence County DD is committed to ensuring that all local, state and federal statutes, rules, or regulations are observed, that agency policies are followed and that agency property is not misappropriated, misused, or destroyed.
- B. Any agency employee or employee of a contracting entity who learns of:
 - 1. a violation of statute, rule or regulation related to the delivery of service;
 - 2. fraud, waste or abuse of government funds;
 - 3. false claims for payment of services rendered;
 - 4. a violation of agency policy; or
 - 5. the misappropriation, misuse or destruction of agency property, by agency personnel or the personnel of a contracting entity may report that violation or misuse by another without reprisal.
- C. Pursuant to the federal Deficit Reduction Act, LCDD will inform its employees and contractors of this “no reprisal” policy as well as the requirements and protections contained in the federal False Claims Act (FCA) (31 U.S.C. 3729-3733). LCDD also requires that all contracting entities have or establish a non-retaliation policy and that the entities inform its employees of the policy.
- D. The FCA holds liable for civil damages anyone who submits or causes someone else to submit a false or misleading claim for government funds. Anyone who knows about the filing of false claims may bring a civil action, and depending on the outcome and other factors, may be entitled to as much as thirty percent of the proceeds of the case.
- E. Under the Ohio Revised Code (ORC) 5164.35 anyone attempting to obtain payments to which they are not entitled can be also held liable under state law.
- F. The FCA also affords whistleblower protections for employees who report misconduct, including protection from retaliation by his/her employer. These protections are in addition to those found in the state’s whistleblower statutes, ORC 124.341 and 4113.52. These statutes provide protections for employees who follow statutory procedures in reporting any violation of federal or state statute, local ordinance, or regulation that is a felony or criminal offense likely to cause an imminent risk of physical harm to persons, and/or a hazard to public health and safety.
- G. Agency employees and employees of a contracting entity shall make reasonable efforts to determine the accuracy of any information reported under this policy. Agency employees may be disciplined for knowingly reporting false information.
- H. Agency employees are strongly encouraged to follow the procedures outlined in the procedural portion of this section.

Adopted 8/13/19

EXPENDITURES FOR PUBLIC PURPOSE

Purpose

The purpose of this policy is to authorize *De Minimis* fringe benefits for employees of LCDD and approve expenditures of public funds for certain events stated herein.

Policy

Pursuant to its power to establish fringe benefits for employees, the Lawrence County Developmental Disabilities (LCDD) approves the expenditure of public funds for the purchase of coffee, meals, snacks, refreshments or other amenities for employees, as *De Minimis* fringe benefits as recognized by the Internal Revenue Service, and for events that support the mission of LCDD.

Beverages and snacks are provided in the common area for LCDD employees and offered to visitors of the administrative offices. The public purpose is to provide common hospitality and refreshments found in other places of business.

For the conveniences of LCDD, it shall provide employees attending in-service days at LCDD's premises an appropriate meal in order to facilitate their attendance at the in-service activities. The public purpose is that it is a captive training event and those in attendance do not have the opportunity to leave for lunch. It is more cost effective to have refreshments available at the same place as the in-service and furthermore, supports the training scheduled provided by LCDD.

For the convenience of LCDD, if a LCDD member in-service training, LCDD meeting or LCDD committee meeting is scheduled to extend beyond three hours and/or occurs during the evening or over a regular meal time, LCDD may provide beverages and refreshments to those attending the meeting. The public purpose is LCDD staff and members must give up their normal mealtime to participate in the scheduled LCDD public meetings.

LCDD may provide beverages and modest refreshments as part of public awareness activities or public meetings such as open houses or events where the general public is invited by LCDD. The public purpose is one of general hospitality.

Refreshments purchased with public funds for any of these events shall be modest and appropriate to a work setting.

Alcoholic beverages shall never be purchased with public funds or served in our facility or at any LCDD sponsored event.

Rule Reference: ORC 5126.05

Adopted: 5/11/2021

ANNUAL PLANNING

- A. The Agency shall develop and adopt a strategic plan in accordance with OAC 5123:2-1-02.
- B. The strategic plan shall meet the requirements of ORC 5126.04 and 5126.054 and include the Agency's mission and vision. The plan shall also address the Agency's strategy for:
 - 1. Promoting self-advocacy by individuals served by the county board;
 - 2. Ensuring that individuals receive services in the most integrated setting appropriate to their needs;
 - 3. Reducing the number of individuals in the county waiting for services;
 - 4. Increasing the number of individuals of working age engaged in community employment; and
 - 5. Taking measures to recruit sufficient providers of services to meet the needs of individuals receiving services in the county.
- C. The Agency shall plan and set priorities based on available resources for the provision of facilities, programs, and other services to meet the needs of Lawrence County residents who are individuals with developmental disabilities, former residents of the county residing in state institutions or placed under purchase of service agreements under section 5123.18 of the Revised Code, and children subject to a determination made pursuant to section 121.38 of the Revised Code.
- D. The Agency shall assess the facility and service needs of the individuals with developmental disabilities who are residents of the county or former residents of the county residing in state institutions or placed under purchase of service agreements under section 5123.18 of the Revised Code.
- E. The Agency shall prepare a strategic plan progress report at least once per year.
- F. The strategic plan and progress report shall be made readily available to individuals and families who receive services, employees of the county board, citizens of the county, and any other interested persons.
- G. The Agency shall have a mechanism for accepting public feedback regarding the strategic plan and strategic plan progress reports.

Reference: OAC 5123:2-1-02, ORC 5126.04

Adopted: 8/13/19

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 2.17 - RECOGNITION OF SERVICE AND RETIREMENT

Purpose

The purpose of this policy is to outline how employees are recognized for years of service and upon retirement.

Policy

The Lawrence County DD believes it is important to recognize employees for their commitment to the individuals and families served, professional accomplishments, and dedication to the agency's mission, vision and values. Only years of service with Lawrence County DD applies to this policy.

A. Staff Recognition

Employees will be recognized for their years of service with Lawrence County DD at five (5), ten (10), fifteen (15), twenty (20), twenty-five (25) and thirty (30) years of service. Employees will be recognized at the annual staff recognition event and presented with a years of service pin.

Also, as part of the employee recognition event, a meal will be provided to all attendees.

B. Retirement

In addition to formal recognition from the Lawrence County DD Board, retirees with at least 20 years of service to Lawrence County DD, will be presented with a commemorative gift. Lawrence County DD will contribute funds up to \$60.00 for the gift.

PROCUREMENT – FEDERAL GRANTS/FUNDS

- A. Procurement of all supplies, materials, equipment, and services paid for from Federal funds or Lawrence County Developmental Disabilities, hereinafter referred to as “LCDD,” matching funds shall be made in accordance with all applicable Federal, State, and local statutes and/or regulations, the terms and conditions of the Federal grant, Board policies, and administrative procedures.
- B. The Business Office shall maintain a procurement and contract administration system in accordance with the USDOE requirements (2 CFR 200.317-.326), including affirmative steps for small and minority businesses and women’s business enterprises, for the administration and management of Federal grants and Federally-funded programs. LCDD shall maintain a contract administration system that requires contractors to perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders. Except as otherwise noted, procurement transactions shall conform to the provisions of LCDD’s documented general contract Policy [\(2.3\)](#) and AG 6320A.
- C. All LCDD employees, officers, and agents who have purchasing authority shall abide by the standards of conduct covering conflicts of interest and governing the actions of its employees, officers, and agents engaged in the selection, award, and administration of contracts as established in Policy [\(2.3\)](#).
- D. LCDD will avoid acquisition of unnecessary or duplicative items. Additionally, consideration shall be given to consolidating or breaking out procurements to obtain a more economical purchase. And, where appropriate, an analysis shall be made of lease versus purchase alternatives, and any other appropriate analysis to determine the most economical approach. These considerations are given as part of the process to determine the allowability of each purchase made with Federal funds.
- E. To foster greater economy and efficiency LCDD may enter into State and local intergovernmental agreements where appropriate for procurement or use of common or shared goods and services.

F. Competition

- 1. All procurement transactions shall be conducted in a manner that encourages full and open competition and that is in accordance with good administrative practice and sound business judgement. In order to promote objective contractor performance and eliminate unfair competitive advantage, the District shall exclude any contractor that has developed or drafted specifications, requirements, statements of work, or invitations for bids or requests for proposals from competition for such procurements.
- 2. Some of the situations considered to be restrictive of competition include, but are not limited to, the following:

- i. Unreasonable requirements on firms in order for them to qualify to do business
 - ii. Unnecessary experience and excessive bonding requirements
 - iii. Noncompetitive pricing practices between firms or between affiliated companies
 - iv. Noncompetitive contracts to consultants that are on retainer contracts
 - v. Organizational conflicts of interest
 - vi. Specification of only a “brand name” product instead of allowing for an “or equal” product to be offered and describing the performance or other relevant requirements of the procurement
 - vii. Any arbitrary action in the procurement process
- 3. Further, LCDD does not use statutorily or administratively imposed State, local, or tribal geographical preferences in the evaluation of bids or proposals, unless (1) an applicable Federal statute expressly mandates or encourages a geographic preference; or (2) the District is contracting for architectural and engineering services, in which case geographic location may be a selection criterion provided its application leaves an appropriate number of qualified firms, given the nature and size of the project, to compete for the contract.
- 4. To the extent that LCDD uses a pre-qualified list of persons, firms or products to acquire goods and services, the pre-qualified list includes enough qualified sources as to ensure maximum open and free competition. LCDD allows all vendors to apply for consideration to be placed on the list continuously.
- 5. LCDD shall require that all prequalified lists of persons, firms, or products which are used in acquiring good and services are current and include enough qualified sources to provide maximum open and free competition. LCDD shall not preclude potential bidders from qualifying during the solicitation period.

G. Solicitation Language (Purchasing Procedures)

- 1. LCDD shall require that all solicitations incorporate a clear and accurate description of the technical requirements for the material, product, or service to be procured. Such description shall not, in competitive procurements, contain features which unduly restrict competition. The description may include a statement of the qualitative nature of the material, product or service to be procured and, when necessary, shall set forth those minimum essential characteristics and standards to which it shall conform if it is to satisfy its intended use. Detailed product specifications should be avoided if at all possible.
- 2. When it is impractical or uneconomical to make a clear and accurate description of the technical requirements, a "brand name or equivalent" description may be used as a means to define the performance or other salient requirements of procurement. The specific features of the named brand which shall be met by offers shall be clearly stated; and

identify all requirements which the offers' shall fulfill and all other factors to be used in evaluating bids or proposals.

3. The Board will not approve any expenditure for an unauthorized purchase or contract.

H. Procurement Methods

LCDD shall utilize the following methods of procurement:

A. Informal Procurement Methods

When the value of the procurement for property or services under a Federal award does not exceed the simplified acquisition threshold, or a lower threshold established by the State, formal procurement methods are not required. LCDD may use informal procurement methods to expedite the completion of its transaction and minimize the associated administrative burden and cost. The informal methods used for procurement of property or services at or below the simplified acquisition threshold include:

i. Micro-purchases

Procurement by micro-purchase is the acquisition of supplies or services, the aggregate dollar amount of which does not exceed \$10,000. To the maximum extent practicable, the District should distribute micro-purchase equitably among qualified suppliers. Micro-purchases may be made without soliciting competitive quotations if the Superintendent considers the price to be reasonable based on research, experience, purchase history or other relevant information and documents are filed accordingly. LCDD shall maintain evidence of this reasonableness in the records of all purchases made by this method.

ii. Small Purchases

Small purchase include the acquisition of property or services, the aggregate dollar amount of which is higher than the micro-purchase threshold but does not exceed the simplified acquisition threshold of \$25,000. Small purchase procedures require that price or rate quotations shall be obtained from an adequate number of qualified sources

B. Formal Procurement Methods

When the value of the procurement for property or services under a Federal award exceeds the simplified acquisition threshold, or a lower threshold established by the State, formal procurement methods are required. Formal procurement methods require following documented procedures. Formal procurement methods

also require public advertising unless a non-competitive procurement method can be used in accordance with the standards on competition in 200.319 or non-competitive procurement. The formal methods of procurement are:

i. Sealed Bids

Sealed, competitive bids shall be obtained when the purchase of, and contract for, single items of supplies, materials, or equipment which amounts to more than \$25,000 and when the Board determines to build, repair, enlarge, improve, or demolish a school building/facility the cost of which will exceed \$50,000.

In order for sealed bidding to be feasible, the following conditions shall be present:

- a. a complete, adequate, and realistic specification or purchase description is available;
- b. two (2) or more responsible bidders are willing and able to compete effectively for the business; and
- c. the procurement lends itself to a firm fixed price contract and the selection of the successful bidder can be made principally on the basis of price.

When sealed bids are used, the following requirements apply:

- a. Bids shall be solicited in accordance with the provision of State law and Policy [\(2.3\)](#) and AG 6320A. Bids shall be solicited from an adequate number of qualified suppliers, providing sufficient response time prior to the date set for the opening of bids. The invitation to bid shall be publicly advertised.
- b. The invitation for bids will include product/contract specifications and pertinent attachments and shall define the items and/or services required in order for the bidder to properly respond.
- c. All bids will be opened at the time and place prescribed in the invitation for bids; bids will be opened publicly.
- d. A firm fixed price contract award will be made in writing to the lowest responsible bidder. Where specified in bidding documents, factors such as discounts, transportation cost, and life cycle costs shall be considered

in determining which bid is lowest. Payment discounts may only be used to determine the low bid when prior experience indicates that such discounts are usually taken.

ii. Proposals

Procurement by proposals is a method in which either a fixed price or cost-reimbursement type contract is awarded. Proposals are generally used when conditions are not appropriate for the use of sealed bids or in the case of a recognized exception to the sealed bid method.

If this method is used, the following requirements apply:

- a. Requests for proposals shall be publicized and identify all evaluation factors and their relative importance. Any response to the publicized requests for proposals shall be considered to the maximum extent practical.
- b. Proposals shall be solicited from an adequate number of sources.
- c. The District shall use its written method for conducting technical evaluations for the proposals received and for selecting recipients.
- d. Contracts shall be awarded to the responsible firm whose proposal is most advantageous to the program, with price and other factors considered.

LCDD may use competitive proposal procedures for qualifications-based procurement of architectural/engineering (A/E) professional services whereby competitors' qualification are evaluated and the most qualified competitor is selected, subject to negotiation of fair and reasonable compensation. The method, where price is not used as a selection factor, can only be used in procurement of A/E professional services. It cannot be used to purchase other types of services through A/E firms are a potential source to perform the proposed effort.

iii. Noncompetitive Procurement

Procurement by noncompetitive proposals allows for solicitation of a proposal from only one source and may be used only when one or more of the following circumstances apply:

- a. Micro-purchases
- b. The item is available only from a single source

- c. The public exigency or emergency for the requirement will not permit a delay resulting from publicizing a competitive solicitation
- d. The Federal awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from LCDD
- e. After solicitation of a number of sources, competition is determined to be inadequate

iv. Noncompetitive Purchases Through Educational Service (ESCs)

Under State law, the Board may enter into a contract with an educational service's center (ESC) that authorizes the ESC to make purchases for supplies, materials, equipment, and services or the delivery of services on LCDD behalf. These contracts promote operational efficiency and cost savings, and further enhance the educational experience for our students. Purchases made through such contracts are exempt from competitive bidding.

The District may apply for approval from ODE to use a noncompetitive purchasing method to procure personnel-based services from an ESC only when the following criteria are met:

- a. The ESC posts a list of all services it provides including costs of these services on its website;
- b. The ESC has been designated as "high performing" by the Ohio Department of Education, and
- c. ODE as the pass-through state entity has determined that the ESC was substantially in compliance with all audit rules and guidelines during the most recent audit conducted by the Auditor of State

The Business Manager will submit an application and any required documentation to ODE on the designated form requesting approval for use of a noncompetitive purchasing method for personnel services. Purchases will not be made until the application is approved. Notice of approval will be maintained by the Business Manager.

I. Domestic Preference for Procurement

As appropriate and to the extent consistent with law, the District shall, to the extent practicable under a Federal award, provide a preference for the purchase, acquisition, or use of goods, products, or materials produced in the United States. Such requirements shall be included in all sub-awards including all contracts and purchase orders for work or products under the Federal award.

J. Contract/Price Analysis

1. LCDD shall perform a cost or price analysis in connection with every procurement action in excess of \$250,000, including contract modifications. A cost analysis generally means evaluating the separate cost elements that make up the total price, while a price analysis means evaluating the total price, while a price analysis means evaluating the total price, without looking at the individual cost elements.
2. The method and degree of analysis is dependent on the facts surrounding the particular procurement situation; however, LCDD shall come to an independent estimate prior to receiving bids or proposals.
3. When performing a cost analysis, LCDD shall negotiate profit as a separate element of the price. To establish a fair and reasonable profit, consideration is given to the complexity of the work to be performed, the risk borne by the contractor, the contractor's investment, the amount of subcontracting, the quality of its record of past performance, and industry profit rates in the surrounding geographical area for similar work.

K. Time and Materials Contracts

1. LCDD uses a time and materials type contract only (1) after a determination that no other contract is suitable; and (2) if the contract includes a ceiling price that the contractor exceeds at its own risk. Time and materials type contract means a contract whose cost to the District is the sum of the actual costs of materials, and direct labor hours charged at fixed hourly rates that reflect wages, general and administrative expenses, and profit.
2. Since this formula generates an open-ended contract price, a time-and-materials contract provides no positive profit incentive to the contractor for cost control or labor efficiency. Therefore, LCDD sets a ceiling price for each contract that the contractor exceeds at its own risk. Further, LCDD shall assert a high degree of oversight in order to obtain reasonable assurance that the contractor is using efficient methods and effective cost controls.

L. Suspension and Debarment

1. LCDD will award contracts only to responsible contractors possessing the ability to perform successfully under the terms and conditions of the proposed procurement. All purchasing decisions shall be made in the best interests of LCDD and shall seek to obtain the maximum value for each dollar expended. When making a purchasing decision, LCDD shall consider such factors as (1) contractor integrity; (2) compliance with public policy; (3) record of past performance; and (4) financial and technical resources.

2. The Superintendent shall have the authority to suspend or debar a person/corporation, for cause, from consideration or award of further contracts. LCDD is subject to and shall abide by the nonprocurement debarment and suspension regulations implementing Executive Orders 12549 and 12689, 2 CFR Part 180.
3. Suspension is an action taken by LCDD that immediately prohibits a person from participating in covered transactions and transactions covered under the Federal Acquisition Regulation (48 CFR chapter 1) for a temporary period, pending completion of an agency investigation and any judicial or administrative proceedings that may ensue. A person so excluded is suspended. (2 CFR Part 180 Subpart G)
4. Debarment is an action taken by the Superintendent to exclude a person from participating in covered transactions and transactions covered under the Federal Acquisition Regulation (48 CFR chapter 1). A person so excluded is debarred. (2 CFR Part 180 Subpart H)
5. LCDD shall not subcontract with or award sub grants to any person or company who is debarred or suspended. For contracts over \$25,000, LCDD shall confirm that the vendor is not debarred or suspended by either checking the Federal government's System for Award Management, which maintains a list of such debarred or suspended vendors at www.sam.gov; collecting a certification from the vendor; or adding a clause or condition to the covered transaction with that vendor. (2 CFR Part 180 Subpart C)

M. Bid Protest

The District maintains the following protest procedures to handle and resolve disputes relating to procurements and, in all instances, discloses information regarding the protest to the awarding agency:

- i. A bidder who wishes to file a bid protest shall file such notice and follow procedures prescribed by the Request for Proposals (RFPs) or the individual bid specifications package, for resolution. Bid protests shall be filed in writing with the Superintendent within seventy-two (72) hours of the opening of the bids in protest.
- ii. Within five (5) days of receipt of a protest, the Superintendent shall review the protest as submitted and render a decision regarding the merits of the protest and any impact on the acceptance and rejection of bids submitted. Notice of the filing of a bid protest shall be communicated to the Board and shall be so noted in any subsequent recommendation for the acceptance of bids and awarding of contracts.
- iii. Failure to file a notice of intent to protest, or failure to file a formal written protest within the time prescribed, shall constitute a waiver of proceedings.

N. Conflict of Interest and Mandatory Disclosures

1. LCDD complies with the requirements of State law and the Uniform Guidance for conflicts of interest and mandatory disclosures for all procurements with federal funds.
2. Each employee, board member, or agent of LCDD who is engaged in the selection, award, or administration of a contract supported by a federal grant or award and who has a potential conflict of interest must disclose that conflict in writing to the Business Manager. The Business Manager discloses in writing any potential conflict of interest to ODE or other applicable pass-through-entity.
3. A conflict of interest would arise when the covered individual, any member of his/her immediate family, his/her partner, or an organization, which employs or is about to employ any of those parties has a financial or other interest in or receives a tangible personal benefit from a firm considered for a contract. A covered individual who is required to disclose a conflict will not participate in the selection, award, or administration of a contract supported by a federal grant or award.
4. Covered individuals will not solicit or accept any gratuities, favors, or items from a contractor or a party to a subcontractor for a federal grant or award. Violations of this rule are subject to disciplinary action.
5. The Business Manager discloses in writing to ODE or other applicable pass-through-entity in a timely manner all violations of federal criminal law involving fraud, bribery, or gratuities potentially affecting any federal award. The Business Manager fully addresses any such violations promptly and notifies the Board accordingly.

O. Equipment and Supplies Purchased with Federal Funds

Equipment and supplies acquired with federal funds will be used, managed, and disposed of in accordance with applicable state and federal requirements. Property records and inventory systems shall be sufficiently maintained to account for and track equipment that has been acquired with federal funds.

P. Accountability and Certifications

All fiscal transactions must be approved by the designee who can attest that the expenditure is allowable and approved under the federal program. The Business Office submits all required certifications.

Q. Monitoring and Reporting Performance

The Business Manager will establish sufficient oversight of the operations of federally supported activities to assure compliance with applicable federal requirements and to ensure that program objectives established by the awarding agency are being achieved. The District submits all reports as required by federal or state authorities.

R. Maintenance of Procurement Records

LCDD maintains records sufficient to detail the history of all procurements. These records will include, but are not necessarily limited to the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price (including a cost or price analysis).

Applicable laws and regulations: 2 C.F.R. 200.317 - .326, Appendix II to Part 200
2 C.F.R. 200.520

R.C. 3313.843 – 3313.846

Adopted : 6/29/21

EARLY INTERVENTION SERVICES

- A. Lawrence County Developmental Disabilities shall provide early intervention services and supports on a year-round basis to eligible infants and toddlers birth through two years of age with developmental delays or disabilities and their families in accordance with applicable local, state, and federal laws, rules and regulations.
- B. Early intervention services and supports may include any of the types of services listed under Part C of the Individuals with Disabilities Education Act 2004 (IDEA).
- C. Lawrence County DD utilizes the following funding sources to administer early intervention services:
 - 1. Early Intervention Service Coordination Grant
 - 2. Title XX funds
 - 3. Local levy funds
- D. Early intervention services provided by LCDD shall be evidence-based and provided in natural environments. Services shall be culturally sensitive to the diversity in families' beliefs, values, and configurations.
- E. LCDD early intervention services shall include:
 - 1. Assurances for procedural safeguards required by part C and rules promulgated by the Ohio Department of Developmental Disabilities;
 - 2. service coordination;
 - 3. Individualized Family Service Plan (IFSP) development;
 - 4. family assessment using routines-based interviews;
 - 5. comprehensive evaluation to determine/redetermine eligibility;
 - 6. ongoing child assessment to determine a child's unique strengths and needs and the early intervention services needed to meet those needs throughout the child's eligibility;
 - 7. primary service provider and coaching interactions in everyday routines, activities, and practices;
 - 8. monitoring of early intervention service delivery;
 - 9. coordinating funding for needed early intervention services;
 - 10. individualized family service plan transition planning;
 - 11. public awareness/child find;
 - 12. services provided in everyday routines, activities, and places as specified in the IFSP; and
 - 13. family access to a core team of professionals including a developmental specialist, occupational therapist, physical therapist, speech/language therapist, and service coordinator.

- F. Early intervention services shall include systems for linking with agencies serving preschool-age children in accordance with the county's Interagency Agreement
- G. Employees of LCDD or contracting entities who are hired to provide service coordination supervision, special instruction, service coordination, evaluation and/or assessment services shall adhere to LCDD personnel policies and procedures and Ohio Department of Developmental Disabilities policies on qualifications, certifications, and licensure.
- H. Early intervention program referrals shall be received from the state's regional central intake provider.
- I. For each infant and toddler through two years of age enrolled in LCDD's early intervention program to receive services and supports cumulative files shall be maintained and include all relevant child and family information and documentation according to local, state, and federal policy, regulation, and law.
 - 1. Early intervention service coordinators shall serve as the single-point of contact for the child's family for carrying out the following activities:
Assisting the parent of the child in obtaining access to needed early intervention services and other services identified in the IFSP, including making referrals to providers for needed services and scheduling appointments for the child and the child's family;
 - 2. Coordinating the provision of early intervention services and other services (such as educational, social, and medical services that are not provided for diagnostic or evaluation purposes) that the child needs or is being provided;
 - 3. Coordinating evaluations and assessments;
 - 4. Facilitating and participating in the development, review, and evaluation of IFSPs;
 - 5. Conducting referral and other activities to assist families in identifying available early intervention service providers;
 - 6. Coordinating, facilitating, and monitoring the delivery of needed early intervention services and other services identified in the IFSP to ensure that the services are provided in a timely manner;
 - 7. Conducting follow-up activities to determine that appropriate early intervention services are being provided;
 - 8. Informing families of their rights and procedural safeguards as set forth in rule 5123-10-01 of Administrative Code;
 - 9. Coordinating the funding sources for needed early intervention services in accordance with rule 5123-10-03 of the Administrative Cod and other services identified in the IFSP;
 - 10. Facilitating the development of a transition plan to preschool, school, or if appropriate, other services in accordance with 5123-10-02 (L);
 - 11. Coordinating the information gathering and completion of the child outcomes summary information to assess the child's development at the

- initial IFSP meeting, annual IFSP meeting, and at the time of the child's exit from the early intervention program;
12. Providing follow-up, after obtaining the parent's consent, to a professional referral source on form EI-14 within sixty calendar days after receiving the early intervention program referral;
 13. Referring the child and the child's family to "Help Me Grow Home Visiting" and other programs in which the parent is interested and for which the child and family be eligible after obtaining parent permission; and
 14. Documenting the performance of the above listed activities and any other early intervention program activities.
- J. LCDD shall ensure that parents are informed of their rights as outlined in federal and state law and regulation. LCDD early intervention personnel shall provide annual notification to families of the availability of procedures based on the resolution of complaints and due process.
- K. LCDD shall maintain provider caseloads in a manner that ensures LCDD will be able to provide services and supports to families as outlined on the IFSP. Provider-to-family ratios shall be reviewed at least annually and variables considered which may affect the ratio.
- L. LCDD shall ensure that sufficient facilities, materials, and equipment are available to address the programmatic needs of infants and toddlers enrolled in early intervention.
- M. LCDD shall provide information to the Ohio Department of Developmental Disabilities for the purpose of monitoring programs for compliance with department rules and federal IDEA 2004 regulations.

Revised: 02/14/23
Revised: 10/08/19
Revised: 09/30/19
Revised: 08/13/19
Revised: 04/18/17
Revised: 12/10/15
Revised: 08/31/12
Revised: 01/06/10
Revised: 12/14/09
Adopted: 02/21/06

EARLY INTERVENTION HOME VISITS

PURPOSE:

On May 12, 2021, Governor Mike DeWine announced that most public health orders would be lifted on June 2, 2021. During the past year, the overwhelming majority of EI services have been provided virtually. Since in-person services can now be provided safely in many cases, the Lawrence County DD has implemented this policy to provide guidance for resuming EI home visits. A departmental procedure will also be developed to guide the process.

POLICY:

- If the Individualized Family Service Plan (IFSP) team, which includes the family receiving services, determines that an EI service should be provided in-person, this method of service delivery will be accommodated.
- Virtual EI service delivery was an option for service method prior to the pandemic, and it remains a viable option if the IFSP team, which includes the family receiving services, determines that a virtual method is appropriate.
- Some families may not be comfortable with in-person interactions. Therefore, DODD is continuing to allow virtual evaluations consistent with [existing guidance](#) through at least August 31, 2021.
- If a family asks a provider to wear a mask for in-person services, this request will be accommodated.
- A family's decision not to receive a COVID-19 vaccination cannot be used to deny EI services.
- Agencies must comply with any relevant state or local public health orders.

Adopted: 6/8/21

EDUCATION OF CHILDREN WITH DISABILITIES

- A. Lawrence County Developmental Disabilities shall provide special education and related services to eligible students in Lawrence County, ages 3 through 21 years in accordance with procedures, standards, and guidelines adopted by the state board of education.
- B. Special education and related services shall meet the Ohio Department of Education (ODE) Operating Standards for the Education of Children with Disabilities, and shall be documented on and provided in accordance with the Individualized Education Plan (IEP).
- C. The Board shall formally adopt procedures for the education of children with disabilities in the format set forth by the ODE and in accordance with state procedures, standards, and guidelines.
- D. Preschool services to children with disabilities shall include services with typically developing peers. The Board shall establish procedures for the enrollment and tuition of typically developing peers.
- E. Related services, including but not limited to, transportation, behavior support, psychology services, speech therapy, occupational therapy, physical therapy, and nursing services shall be available according to the Board's plan and priorities as based on available resources.
- F. The Board shall maintain staff to child ratios as prescribed by ODE.
- G. Annually, the Board shall enter into agreements with school districts in Lawrence County who desire to participate in the provision of preschool special education, school age special education, and related services offered by the Board.
- H. On or before the first day of February prior to a school year, the Board may elect not to participate during that school year in the provision of educational services for children ages 6 through 21 years of age. On or before the first day of February the Board shall notify the superintendent of public instruction, each school district in Lawrence County, and the education service center of the Board's decision to not participate.
- I. The Board shall comply with ODE requirements related to administration and staff qualifications, education, experience, certification and/or licensure.
- J. The Board shall maintain procedures for the operation of the Board's preschool and school-age facilities. The Board's preschool programs shall comply with the ODE Preschool Licensing Rules.

Revised: 8/13/19, 2/16/16

SCHOOL AGE SERVICES

A. Minimum Standards

The School Age Program shall be provided as a separate public school on the continuum of alternative placements available to meet the needs of students throughout the county with significant disabilities for special education and related services.

The School Age Program shall adhere to all school requirements outlined in the minimum standards for chartering county board of developmental disabilities special education schools (Ref.: OAC 3301-53-01). The minimum school requirements include:

1. Hours in a school year (ORC 3313.48);
2. Required immunizations (ORC 3313.67);
3. Emergency medical authorization (ORC 3313.712);
4. Nursing services (ORC 3313.72);
5. Safeguarding of student records (ORC 3319.321);
6. Student attendance (ORC 3321.04);
7. Education of children with disabilities (ORC Chapter 3323);
8. Inspection of schools by the board of health (ORC 3707.26);
9. A Safety Plan including drills and rapid dismissals (ORC 3737.73); and
10. Operating Standards for Kindergarten through Twelfth Grade (OAC 3301-35-01).

B. Model Policies

With the adoption of this policy, the Lawrence County Developmental Disabilities is adopting written policies regarding the manner in which the School Age Program fulfills its obligations under the Public Law Number 94-142 Individuals with Disabilities Education Improvement Act of 2004 (IDEA) and as amended and the *Ohio Operating Standards for the Education of Children with Disabilities* found in Ohio Administrative Code Rules 3301-51-01 to 09, 11 and 21, effective July 1, 2014, (hereafter referred to as the "Operating Standards"). The Operating Standards require that the Board adopt written policies in a number of different areas, and the Board has chosen to adopt the July 1, 2009 document entitled *Special Education Model Policies Procedures* as promulgated by the Ohio Department of Education's Office of Exceptional Children (ODE-OEC) in order to satisfy these requirements of the Operating Standards. This document, hereafter referred to as "Appendix A," while comprehensive, does not include every requirement set forth in the IDEA, the regulations implementing IDEA, the

Operating Standards, the Ohio Revised Code (ORC) and/or Ohio the Administrative Code (OAC). The Board recognizes its obligation to follow these laws and have them implemented in the School Age Program, regardless of whether their provisions are restated Appendix A. (Ref.: OAC Chapter 3301-51)

C. Eligibility

To be eligible for admission to the School Age Program, an individual shall be:

1. At least five and not yet twenty-two years of age, if such placement is deemed appropriate through the Individual Education Plan (IEP) process;
2. Recommended for placement in the program as the least restrictive environment by the school district of residence (hereafter referred to as “the District”) in accordance with OAC 3301-51-02 to make a Free Appropriate Public Education available to each eligible child; and
3. Determined eligible to receive services from the Lawrence County DD.

D. Attendance

Attendance is required in the School Age Program to foster students’ academic success. The School will partner with the student, their family and resident district to identify and reduce barriers to regular school attendance. The School will utilize a continuum of strategies to reduce student absence in alignment with House Bill 410 (2016) as follows:

1. Daily student attendance, late arrivals and early dismissals will be documented in hours not days.
2. The definition of truancy and excessive absences will be adhered to as stated in HB 410 and procedures will include steps to engage the student and family before filing a complaint with juvenile court including parent notification, an absence intervention team and an absence intervention plan.

E. Curriculum

1. The School Age Program includes classroom, small group and individual instruction providing a comprehensive educational and habilitation program for students with disabilities in accordance with Ohio’s academic extended content standards as applicable to each student. The School shall implement a curriculum and instructional program that is characterized by systematic planning, articulation and evaluation based on those subjects required by the Ohio Revised Code, student grade level requirements and individual need. Teachers will establish and communicate clear, high expectations for academic performance, attendance and conduct for all students regardless of gender, race, ethnicity, English proficiency or disability. The School shall diagnose and assess the needs of students, monitor and analyze performance, continually improve programs and procedures to better meet student needs (OAC 3301-35-04).
2. The prescribed curriculum will be based on the requirements of ORC 3313.60 in a manner that is age and developmentally appropriate using researched-based strategies that are effective for educating the student based on individual need.

3. The School Age Program administration and teachers will ensure that every student receives an education that fulfills the graduation requirements outlined in ORC 3313.603 based on the academic extended content standards and IEP for each student.
4. Activities that are part of a functional curriculum are to be blended with the skills and objectives in Ohio's *Academic Content Standards-Extended* to increase functional performance for transition to life beyond school age services.
5. Related services are to be provided to students based on individual need in the areas of speech and communication, occupational and physical therapy.

F. Use of Assessments

Professional development for staff that teaches accepted standards of practice in the selection, administration, interpretation, and use of assessments will be provided annually.

1. The professional development will include assessment practices that, when used to qualify students for graduation, promotion, special programs or services, conform to current professional standards for validity and reliability.
2. Multiple and appropriate assessments shall be used to measure student progress.
3. The information will be shared with parents, the student and the community regarding assessment purposes and results. (Ref.: OAC 3301-35-04-B)

G. Positive Behavior Intervention and Supports

The Lawrence County Developmental Disabilities has adopted the Ohio Department of Education's Model Policy and Procedures document, referenced here as Appendix B, which applies to all school districts regarding the use of positive behavior intervention and supports (PBIS), and the limited use of restraint and seclusion. (Ref.: OAC 3301-35-15) These procedures and any additional ones deemed necessary by the administration shall be used in the implementation of all aspects of school PBIS. This includes measures to ensure an appropriate number of personnel are trained in crisis management and de-escalation techniques.

H. Complaint Resolution

Complaints regarding School Age Services will be processed through the local educational agency of the student in accordance with the procedures specified in Appendix A.

- I. This policy does not include all topics related to school operations. If a topic is not included in the School policy or its addendums, then other policies of the Board may apply. Many topics concerning health and safety, for instance, may be found in Policy 4.03 Addressing General Health and Well-Being in Facilities of the County Board.

- J. Professional Development

Information regarding the Local Professional Development Committee (LPDC), as it relates to Ohio Department of Education teacher licensure, is available in the LPDC procedure manual a copy of which is to be kept in the school office.

Written procedures shall also be developed regarding a planned sequence of continuing education and annual training opportunities specifically for paraprofessional members of staff.

See also Appendix A and Appendix B

Adopted: 12/11/18



SPECIAL EDUCATION MODEL POLICIES AND PROCEDURES

July 2, 2009

Adopted on:

December 11, 2018

Date

By:

Lawrence County Developmental Disabilities
District

INTRODUCTION

By adopting these Model Policies and Procedures, the Lawrence County DD (the “District”) is adopting written policies and procedures regarding the manner in which the District fulfills its obligations under the Individuals with Disabilities Education Improvement Act of 2004 (IDEA) and the *Ohio Operating Standards for Ohio Educational Agencies Serving Children with Disabilities* (hereafter referred to as the “Operating Standards”). The Operating Standards require that the District adopt written policies and procedures in a number of different areas, and the District has chosen to adopt the model policies and procedures promulgated by the Ohio Department of Education’s Office for Exceptional Children (ODE-OEC) in order to satisfy these requirements of the Operating Standards.

This document, while comprehensive, does not include every requirement set forth in the IDEA, the regulations implementing IDEA, the Operating Standards, the Ohio Revised Code (ORC) and/or the Ohio Administrative Code (OAC). The District recognizes its obligation to follow these laws, regardless of whether their provisions are restated in the Model Policies and Procedures.

I. FREE APPROPRIATE PUBLIC EDUCATION (FAPE)

The District ensures that a free appropriate public education (FAPE) is made available to all children with disabilities between the ages of 3 and 21, inclusive, in accordance with IDEA and the Operating Standards.

A. RESIDENTIAL PLACEMENT

If the District places a child with a disability in a public or private residential program deemed necessary to provide special education and related services to a child with a disability, the program, including non-medical care and room and board, is at no cost to the parents of the child.

B. ASSISTIVE TECHNOLOGY

The District makes assistive technology available if required as part of the child's special education, related services or supplementary aids and services.

C. EXTENDED SCHOOL YEAR (ESY) SERVICES

The District ensures that extended school year services are provided if a child's individualized education program (IEP) team determines that the services are necessary for the provision of FAPE to the child. If a child is transitioning from Part C services, the District considers extended school year (ESY) services as part of the IEP process.

D. NONACADEMIC SERVICES

The District takes steps, including the provision of supplementary aids and services determined appropriate and necessary by the child's IEP team, to provide nonacademic and extracurricular services and activities in the manner necessary to afford children with disabilities an equal opportunity for participation in those services and activities as provided to students without disabilities.

Nonacademic and extracurricular services and activities include counseling services, athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the school district, referrals to agencies that provide assistance to individuals with disabilities

and employment of students, including both employment by the school district and assistance in making outside employment available.

E. PROGRAM OPTIONS AND PHYSICAL EDUCATION

The District takes steps to ensure that children with disabilities served by the District have available to them the variety of educational programs and services available to nondisabled children served by the school district, including art, music, industrial arts, consumer and homemaking education and vocational education.

The District ensures that a child with a disability receives appropriate physical education services. The District affords each child with a disability the opportunity to participate in a regular physical education program available to non-disabled children, unless the child is enrolled full time in a separate facility or needs specially designed physical education, as prescribed in the child's IEP. The District provides a specially designed physical education program if prescribed by the IEP.

For preschool children, the District considers adapted physical education or related services, as appropriate, in conjunction with center-based or itinerant teacher services, and considers the factors set forth in 3301-51-11(F) of the Operating Standards.

F. TRANSPORTATION

The District provides, as a related service, transportation service in accordance with IDEA and the Operating Standards.

II. CONFIDENTIALITY

The District safeguards the confidentiality of personally identifiable information at use, collection, storage, retention, disclosure and destruction stages. In the District, Lawrence County DD (name of responsible official) is responsible for maintaining the confidentiality of personally identifiable information. The District ensures that all persons collecting or using personally identifiable information receive training and instruction regarding the District's policies regarding that information. The District maintains for public inspection a current listing of the names and positions of those employees within the agency who may have access to personally identifiable information. The District gives notice to all parents of students receiving special education and related services that is adequate to fully inform parents about confidentiality requirements, in accordance with 3301-51-04(C) of the Operating Standards. The District also ensures that its contractors adhere to applicable confidentiality requirements.

A. ACCESS RIGHTS

The District permits parents (or a representative of a parent) to inspect and review any education records relating to their children that are collected, maintained, or used by the District. If any education record includes information on more than one child, the parents of those children have the right to inspect and review only the information relating to their child or to be informed of that specific information. The District does not charge a fee to search for or retrieve information. The District may charge a fee for copies of records, but does not charge a fee for copies of records that will effectively prevent the parents from exercising their right to inspect and review records.

The District complies with a request to access records without unnecessary delay and before any meeting regarding an IEP, or any hearing pursuant to 3301-51-05 of the Operating Standards, and any resolution session pursuant to 3301-51-05 of the Operating Standards, and in no case more than 45 days after the request has been made.

The District responds to reasonable requests for explanations and interpretations of the records, provides copies if failure to provide copies would effectively prevent the parent from exercising the right to inspect and review the records and permits a representative of a parent to inspect and review records.

The District presumes that a parent has the authority to inspect and review records relative to that parent's child unless the District has been advised that the parent does not have the authority under applicable state law governing such matters as guardianship, separation and divorce.

Upon request, the District provides parents a list of the types and locations of education records collected, maintained or used by the District.

The District keeps a record of parties obtaining access to education records collected, maintained or used under Part B of the IDEA (except access by parents and authorized employees of the participating agency), including the name of the party, the date access was given and the purpose for which the party is authorized to use the records.

B. AMENDMENT OF RECORDS/HEARING PROCESS

If a parent requests the District to amend the information in the education records collected, maintained or used in the provision of special education or related services, the District decides whether to amend the information in accordance with the request within a reasonable period of time. If the District decides to refuse to amend the information in accordance with the request, it informs the parent of the refusal and advises the parent of the right to a hearing as set forth below and in 3301-51-04 of the Operating Standards.

(1) HEARING PROCEDURE

If the parent requests a hearing to challenge information in education records, the hearing is conducted in accordance with the procedures in 34 Code of Federal Regulations (C.F.R.) 99.22 (July 1, 2005) and within a reasonable period of time after the District receives the request. The hearing is conducted in accordance with the following procedures:

- (a) The parents shall be given notice of the date, time and place reasonably in advance of the hearing;
- (b) The records hearing shall be conducted by any individual, including an official of the District, who does not have a direct interest in the outcome of the hearing;
- (c) The parents shall be afforded a full and fair opportunity to present evidence relevant to the child's education records and the information the parent believes is inaccurate or misleading or violates the privacy or other rights of the child;
- (d) The parents may, at their own expense, be assisted or represented by one or more individuals of their choice, including an attorney;
- (e) The District makes its decision in writing within a reasonable period of time after the hearing; and
- (f) The decision is based solely upon the evidence presented at the hearing and includes a summary of the evidence and the reasons for the decision.

(2) RESULTS OF HEARING

If the District, as a result of the hearing, decides that the information is inaccurate, misleading or otherwise in violation of the privacy or other rights of the child, it amends the information accordingly and informs the parent in writing.

If the District, as a result of the hearing, decides that the information is not inaccurate, misleading or otherwise in violation of the privacy or other rights of the child, it must inform the

parent of the parent's right to place in the child's records a statement commenting on the information or setting forth any reasons the parents disagree with the decision of the District.

Any explanation placed in the records of a child are:

- (a) Maintained by the District as part of the records of the child as long as the record or contested portion is maintained by the District; and
- (b) Disclosed any time the records of the child or the contested portion is disclosed by the District to any party.

C. PARENTAL CONSENT PRIOR TO DISCLOSURE OF RECORDS

The District obtains parental consent before personally identifiable information is disclosed to parties, other than officials of participating agencies in accordance as defined by 3301-51-04(B)(3) of the Operating Standards, unless the information is contained in education records and the disclosure is authorized without parental consent under the Family Educational Rights and Privacy Act of 1974, August 1974, 20 U.S.C. 1232g (FERPA).

The parent's consent must be in writing, signed and dated and must:

- (1) Specify the records to be disclosed;
- (2) State the purpose of the disclosure; and
- (3) Identify the party or class of parties to whom the disclosure may be made.

The District obtains parental consent, or the consent of an eligible child who has reached the age of majority under Ohio law, before personally identifiable information is released:

- (1) To officials of participating agencies providing or paying for transition services in accordance with 3301-51-07 of the Operating Standards;
- (2) To officials in another district or school in connection with the child's enrollment in a nonpublic school; and/or
- (3) For purposes of billing insurance and/or Medicaid.

D. TRANSFER OF RIGHTS AT AGE OF MAJORITY

The District affords rights of privacy to children similar to those afforded to parents, taking into consideration the age of the child and type or severity of disability.

The rights of parents regarding education records under FERPA transfer to the child at age 18.

If the rights accorded to parents under Part B of the IDEA are transferred to a child who reaches the age of majority (which is 18 in Ohio), the rights regarding education records also transfer to

the child. See Chapter IV, Procedural Safeguards, Section G, regarding the transfer of rights under IDEA at the age of majority.

Once a child reaches the age of 17, the IEP must include a statement that the child has been informed regarding this transfer of rights.

E. DISCIPLINARY INFORMATION AND REPORTS TO LAW ENFORCEMENT

The District includes in the records of a child with a disability a statement of any current or previous disciplinary action that has been taken against the child and transmits the statement to the same extent that disciplinary information is included in, and transmitted with, the records of nondisabled children.

When a child transfers from the District, the transmission of any of the child's records includes both the child's current IEP and any statement of current or previous disciplinary action that has been taken against the child.

A statement of disciplinary action shall:

- (1) Specify the circumstances that resulted in the disciplinary action and provide a description of the disciplinary action taken if the disciplinary action was taken because the child:
 - (a) Carried a weapon to or possessed a weapon at school, on school premises or to or at a school function;
 - (b) Knowingly possessed or used illegal drugs, or sold or solicited the sale of a controlled substance, while at school, on school premises or at a school function; or
 - (c) Inflicted serious bodily injury upon another person while at school, on school premises or at a school function; and
- (2) Include any information that is relevant to the safety of the child and other individuals involved with the child.

A statement of disciplinary action may include a description of any other behavior engaged in by the child that required disciplinary action, and a description of the disciplinary action taken.

If the District reports a crime to the appropriate law enforcement officials, the District transmits copies of the special education and disciplinary records of the child to those officials only to the extent that the transmission is permitted by FERPA and any other applicable laws.

F. DESTRUCTION OF RECORDS

The District informs parents when personally identifiable information is no longer needed to provide educational services to the child. If the parents request, the information is then destroyed. However, a permanent record of a student's name, address, telephone number, grades, attendance record, classes attended, grade level completed and year completed is maintained without time limitation.

III. CHILD FIND

In accordance with federal law, the District assumes responsibility for the location, identification and evaluation of all children birth through age 21 who reside within the district and who require special education and related services.

This includes students who are:

- (1) Advancing from grade to grade;
- (2) Enrolled by their parents in private elementary or private secondary schools, including religious schools, located in our District (regardless of the severity of their disability);
- (3) Wards of the state and children who are highly mobile, such as migrant and homeless children; and
- (4) Home-schooled.

A. RESPONSIBILITY FOR DETERMINING ELIGIBILITY

In the District, the Evaluation Team ensures that the student meets the eligibility requirements of IDEA and state regulations.

In all cases, the Evaluation Team will not determine that a student has a disability if the suspected disability is because of a lack of instruction in reading or math. If the student is not proficient in English, the District will not identify the student as disabled if the limited English proficiency (LEP) is the cause of the suspected disability.

B. CHILD IDENTIFICATION PROCESS

(1) GENERAL

The District has a child identification process that includes the location, identification and evaluation of a child suspected of having a disability. **Each Local Education Agency** (title of individual or department) coordinates the child identification process. The department and its staff use a variety of community resources and systematic activities in order to identify children requiring special services. District staff members consult with appropriate representatives of private school students attending private schools located in the District in carrying out this process. The District ensures that this process for students attending private or religious schools

located in the District is comparable to activities undertaken for students with disabilities in the public schools.

(2) IDENTIFICATION OF CHILDREN BETWEEN THE AGES OF BIRTH TO AGE 3.

When the District becomes aware of a child between the ages of birth to 3 who has or may have a disability, it either:

- (a) Makes a child referral directly to the county family and children first council responsible for implementing the “Help Me Grow” (HMG) early intervention services under Part C of the IDEA; and/or
- (b) Provides the parents with the information so that they can make the referral themselves.

Parents may opt out of and/or opt not to be referred for Part C services. They may request an evaluation from the District to determine if their child has a disability that may require special education. These parents are entitled to an evaluation from the District, even if the child is between the ages of birth to 3. The District is responsible for providing an evaluation but is not responsible for the provision of FAPE for an eligible child until the child is age 3.

(3) TRANSITION TO SPECIAL EDUCATION FROM HELP ME GROW (HMG).

The District and the county family and children first council responsible for HMG have a current interagency agreement that includes processes for the referral of children from HMG to the District. The District has an assigned transition contact, **Lawrence County DD Preschool Supervisor**, who is the primary person responsible for contact with HMG regarding children transitioning from that program.

- (a) If invited by a representative of HMG (and with parent permission), a District representative attends a transition conference to discuss transition from early intervention services to preschool for a child suspected of having a disability.
- (b) If the parents request, the District invites the Part C service coordinator to the initial IEP meeting.

If there is a suspected disability and the child is eligible for special education and related services as a preschool child, the District works to ensure that an IEP is in place and implemented by the child’s third birthday. In the case of children who are 45 days or less from their 3rd birthdays and who are suspected of having disabilities, an evaluation is completed within 60 days of parental consent, but an IEP is not required by their third birthdays.

As part of the IEP process, the IEP team determines if extended school year services are required for the preschool child.

(4) COORDINATION WITH OTHER AGENCIES.

The District has interagency agreements with Head Start programs within the school district’s service delivery that provide for:

- (a) Service coordination for preschool children with disabilities, 3 through 5 years of age, in a manner consistent with the state interagency agreement for service coordination with Head Start; and
- (b) Transition of children eligible for special education and related services as a preschool child at age 3.

The District also has interagency agreements with the relevant county board(s) of MR/DD for identification, service delivery and financial responsibilities to adequately serve preschool children with disabilities 3 through 5 years of age.

C. DATA COLLECTION

The District maintains an education management information system and submits data to ODE pursuant to rule 3301-14-01 of the Administrative Code. The District's collection of data includes information needed to determine if significant disproportionality based on race and ethnicity is occurring in the District with respect to the identification of children as children with disabilities, the placement of children in educational settings and the incidence, duration and type of disciplinary actions.

IV. Procedural Safeguards

A. PRIOR WRITTEN NOTICE

The District provides prior written notice as required by IDEA and Operating Standards. See Appendix A which summarizes the situations in which prior written notice is required. The District uses the form required by ODE-OEC Prior Written Notice PR-01.

(1) CONTENT OF PRIOR WRITTEN NOTICE

The prior written notice, in accordance with the IDEA regulations and the Operating Standards, includes the following information to ensure that parents are fully informed of the action being proposed or refused:

- (a) A description of the action proposed or refused by the District;
- (b) An explanation of why the District proposes or refuses to take this action;
- (c) A description of other options that the IEP team considered and the reasons why those options were rejected;
- (d) A description of each evaluation procedure, assessment, record or report that the District used as a basis for the proposed or refused action;
- (e) A description of other factors that are relevant to the District's proposal or refusal;
- (f) A statement that the parents of a child with a disability have procedural safeguards and, if the notice is not an initial referral for evaluation, the means by which a copy of the description of procedural safeguards can be obtained; and
- (g) Sources for parents to contact to obtain assistance in understanding the provisions of Ohio's rule regarding procedural safeguards.

(2) COMMUNICATION OF THE PRIOR WRITTEN NOTICE

The District provides the notice in the native language of the parents or other mode of communication used by the parents unless it is clearly not feasible to do so.

If the native language or other mode of communication is not a written language, the District takes steps to have the notice translated orally or by other means to the parent in the parent's native language or other mode of communication. The District takes steps to ensure that such parents understand the content of the notice and maintains written evidence that both requirements set forth in this paragraph, if applicable, have been met.

The District may provide the prior written notice, procedural safeguards notice and the notification of a due process complaint by e-mail if the parents choose to receive the notices electronically.

B. PROCEDURAL SAFEGUARDS NOTICE

Parents of a child with a disability are entitled to specific procedural safeguards under IDEA and the Operating Standards.

Whose IDEA Is This? A Parent's Guide to the Individuals with Disabilities Education Improvement Act of 2004, developed by ODE-OEC, includes a full explanation of these procedural safeguards as required by IDEA and 3301-51-02, 3301-51-04 and 3301-51-05 of the Operating Standards.

The District provides parents with a copy of *Whose IDEA Is This?* at least once a year. This includes:

- (1) Providing a copy to the parents of a child who transfers into the District from out-of-state; and
- (2) Providing a copy to the parents of a child who transfers into the District from an in-state school if the sending District has not provided a copy to the parents during the current school year.

In addition, the District provides parents with a printed copy of this procedural safeguards notice in each of the following circumstances:

- (1) The initial referral or parental request for evaluation;
- (2) The receipt of the first due process complaint in a school year;
- (3) A change in placement for disciplinary action; and
- (4) When requested by the parents or the child who has reached the age of majority.

In providing *Whose IDEA is This?*, the District follows the procedures for communication that are described above under Prior Written Notice.

C. PARENTAL CONSENT

Consent means that the parents:

- (a) Have been fully informed, in the parents' native language or other mode of communication, of all information relevant to the activity for which consent is sought;
- (b) Understand and agree in writing to the carrying out of the activity for which the consent was asked. The consent describes that activity and lists the records (if any) that will be released and to whom they will be released; and
- (c) Understand that the granting of consent is voluntary and may be revoked at any time.

(1) ACTIONS REQUIRING INFORMED WRITTEN PARENTAL CONSENT

The District obtains written consent from the parents before:

- (a) Conducting an initial evaluation to determine if a child is eligible for special education;
- (b) Initially providing special education and related services;
- (c) Conducting a reevaluation when assessments are needed;
- (d) Making a change in placement on the continuum of alternative placement options (i.e., regular classes, special classes, special schools, home instruction and instruction in hospitals and institutions); and
- (e) Releasing personally identifiable information about the child to any person other than a person authorized to obtain those records without parental consent pursuant to FERPA. For example, parental consent is obtained prior to releasing records to a representative of an agency that is likely to be responsible for providing or paying for transition services or

for the purposes of billing Medicaid.

The District uses the ODE-OEC required Consent for Evaluation PR-05 form to obtain written parental consent for evaluation and reevaluation and the required IEP PR-07 form to obtain written parental consent for the initial provision of special education and related services and for making a change in placement.

The District does not obtain written parental consent when reviewing existing data as part of an evaluation or reevaluation or when administering a test or evaluation that is given to all children, unless consent is required of all parents.

(2) CHANGE IN PLACEMENT

Once the District receives the initial parental consent for special education and related services, the District must obtain consent only for a change in placement. A “change of placement” means a change from one option on the continuum of alternative placements to another (instruction in regular classes, special schools, home instruction and instruction in hospitals and institutions).

If the District cannot obtain parental consent, it may file a due process complaint requesting a due process hearing or engage in conflict resolution to obtain agreement or a ruling that the placement may be changed.

(3) PARENTS’ FAILURE TO RESPOND OR REFUSAL TO PROVIDE CONSENT

The District makes “reasonable efforts” to contact parents and obtain written parental consent that may include:

- (a) Written correspondence;
- (b) Phone calls;
- (c) Electronic mail communications, to include but not limited to e-mail and passwordprotected parent pages; and/or
- (d) Visits to the home or parents’ places of employment.

The District documents its attempts. If the parents fail to respond or refuse to provide consent, the District proceeds as follows:

(4) INITIAL EVALUATION

If the parents fail to respond to the District's efforts to obtain consent or refuse consent for the initial evaluation, the District may:

- (a) Request a due process hearing and engage in conflict resolution (e.g., resolution meeting and/or mediation) to convince the parents to provide their consent; or
- (b) Decide not to pursue the initial evaluation and provide the parents with prior written notice.

If the child is being home schooled or has been placed in a private school at the parents' expense, the District cannot file a due process complaint or request the parents to participate in a resolution meeting and/or mediation.

(5) REEVALUATION

If the parents fail to respond to the District's efforts to obtain consent for a reevaluation when assessments are needed, the District proceeds with the reevaluation.

If the parents expressly refuse consent for a reevaluation when assessments are needed, the District may:

- (a) Agree with the parents that a reevaluation is unnecessary;
- (b) Conduct a reevaluation by utilizing data and/or documentation that the District already possesses;
- (c) Request a due process hearing and engage in conflict resolution (e.g., resolution meeting and/or mediation) to convince the parents to provide their consent; or (d) Decide not to pursue having the child reevaluated.

The District continues to provide FAPE to the child if the District agrees with the parents that a reevaluation is unnecessary.

(6) INITIAL PROVISION OF SPECIAL EDUCATION AND RELATED SERVICES

If the parents do not attend the IEP meeting to develop the IEP for the initial provision of services, the District attempts to obtain written parental consent through other methods such as calling the parents, corresponding with the parents and or visiting the parents.

If the parents expressly refuse consent, as evidenced by their signatures on the IEP indicating that consent is not given, the District maintains a copy of the signed IEP showing that the District offered FAPE.

If the parents fail to respond or refuse consent, the District provides the parents with prior written notice and continues to provide the child with appropriate interventions in the regular education classroom. The District may not request a due process hearing or engage in conflict resolution to obtain agreement or a ruling that services may be provided to the child.

The District does not use the parents' refusal to consent to one service or activity to deny the parents or the child any other service, benefit or activity in the District, except in those instances in which IDEA authorizes that denial.

(7) REVOCATION OF CONSENT

The parents may revoke consent for and remove the child from special education and related services. Once the District receives written revocation of consent, it provides the parents with prior written notice and continues to provide the child with appropriate interventions through the regular education environment.

The District is not required to amend the child's education records to remove any references to the child's receipt of special education and related services because of the revocation of consent.

If a parent has provided written revocation of consent, the District does not file a due process complaint or engage in conflict resolution to attempt to obtain agreement or a ruling that special education and related services may be provided to the child.

D. INDEPENDENT EDUCATIONAL EVALUATION

Parents who disagree with an evaluation that was completed or obtained by the District may request an independent educational evaluation at public expense. Parents are entitled to request only one independent educational evaluation at public expense each time the District conducts an evaluation with which the parents disagree.

(1) INDEPENDENT EDUCATIONAL EVALUATION AT PUBLIC EXPENSE

If the parents request an independent educational evaluation at public expense, the District either:

- (a) Ensures that an independent evaluation is provided at public expense; or
- (b) Files a due process complaint requesting a hearing to show that the District's evaluation is appropriate.

If the District files a due process complaint and the final decision is that the District's evaluation is appropriate, the parent still has the right for an independent educational evaluation, but not at the public expense.

(2) PARENT INITIATED EVALUATIONS

If a parent obtains an independent educational evaluation at public expense or shares with the District an evaluation obtained at private expense, the District considers that evaluation, if it meets District criteria, in any decision made with respect to the provision of FAPE to the child.

(3) DISTRICT CRITERIA

If an independent educational evaluation is at public expense, the criteria under which the evaluation is obtained, including the location of the evaluation and the qualifications of the examiner, must be the same as the criteria which the District uses when it initiates an evaluation, to the extent those criteria are consistent with the parent's right to an independent educational evaluation. Except for the above-mentioned criteria, the District does not impose conditions or timelines related to obtaining an independent educational evaluation at public expense.

E. CONFLICT RESOLUTION

(1) ADMINISTRATIVE REVIEWS

Within 20 days of receipt of a complaint from a child's parents or another educational agency, the District's superintendent, or the superintendent's designee, conducts a review, may hold an administrative hearing and notifies all parties of the decision in writing.

- (a) All parties have the right to invite others, including legal counsel, to participate in the review.
- (b) The review is conducted at a time and place convenient to all parties.
- (c) Every effort is made to resolve any disagreements at the administrative review.

(2) MEDIATION

At its discretion, the District participates in the resolution of disputes with other parties through the voluntary mediation processes available through ODE-OEC.

(3) IMPARTIAL DUE PROCESS HEARING/RESOLUTION MEETINGS

Due process complaints filed against the District proceed in the manner set forth in 3301-51-05(K) of the Operating Standards.

The District convenes a resolution meeting before the initiation of a due process hearing. The resolution meeting:

- (a) Occurs within 15 days of the receipt of notice of the parents' due process complaint;
- (b) Includes a representative of the District who has decision-making authority on behalf of the District;
- (c) Does not include the District's attorney unless the parents are accompanied by an attorney;

- (d) Provides an opportunity for the parents to discuss their due process complaint and the facts the complaint is based on; and
- (e) Provides the District an opportunity to resolve the dispute.

The District does not hold a resolution meeting if the parents and the District agree in writing to waive the meeting or agree to use the mediation process. Also, if the District files the due process complaint, it is not required to hold a resolution meeting.

The District, if it is the child's school district of residence, is responsible for conducting the impartial due process hearing utilizing the hearing officer appointed by ODE-OEC. The District follows the procedures required by 3301-51-05(K)(10)–(15) of the Operating Standards when conducting a hearing at a time and place that is reasonably convenient to the parents and the child involved.

If the parents request to inspect and review any education records relating to their child, the District replies without unnecessary delay and makes the records available before the hearing.

The District provides the parents with one copy of the written, or at the option of the parents, an electronic verbatim record of the hearing and findings of fact and decision at no cost. The decision is final except that any party to the hearing may appeal the decision to ODE-OEC.

The District pays for the costs incurred for the hearing except for expert testimony, outside medical evaluations, witness fees, subpoena fees and cost of counsel requested by the other party to the hearing and compensates the hearing officer as provided in 3301-51-05(K)(16)(d) of the Operating Standards. If the hearing was requested by another agency, the District shares the costs of the hearing except for the costs identified in the preceding sentence.

Any further appeals or actions proceed in accordance with 3301-51-05 of the Operating Standards.

F. CHILD'S STATUS DURING DUE PROCESS PROCEEDINGS/CODE OF CONDUCT VIOLATIONS

(1) CHILD'S STATUS DURING DUE PROCESS PROCEEDINGS

The District ensures that a child remains in the current educational placement during the pendency of any administrative or judicial proceeding regarding a due process complaint, unless the state or the District and the parents of the child agree otherwise. If the state level review officer agrees with the child's parents that a change in placement is appropriate, that placement is treated as an agreement between the state and the parents.

If the complaint involves an application for initial admission to the District, the child, with the consent of the parents, is placed in the District until the completion of all proceedings.

If the complaint involves an application for services from a child who is transitioning from Part C to Part B, the District provides those special education and related services that are not in dispute, if the child is found eligible for special education and related services under Part B and the parent consents to the initial provision of special education and related services.

(2) DISCIPLINARY PROCEEDINGS

The District may consider any unique circumstances on a case-by-case basis when determining whether a change in placement, consistent with the other requirements of 3301-51-05 of the Operating Standards, is appropriate for a child with a disability who violates a code of student conduct.

(a) Changes in placement less than 10 consecutive school days

The District may remove a child with a disability who violates a code of student conduct from the child's current placement to an appropriate interim alternative educational setting, another setting, or suspension, for not more than 10 consecutive school days (to the extent those alternatives are applied to children without disabilities), and for additional removals of not more than 10 consecutive school days in that same school year for separate incidents of misconduct (as long as those removals do not constitute a change of placement).

The District considers on a case-by-case basis whether a pattern of removals constitutes a change of placement. A change in placement occurs if:

- (1) The removal is for more than 10 consecutive school days, **or**
- (2) The child has been subjected to a series of removals that constitute a pattern:
 - (a) Because the series of removals totals more than 10 school days in a school year;
 - (b) Because the child's behavior is substantially similar to the child's behavior in previous incidents that resulted in the series of removals; and
 - (c) Because of such additional factors as the length of each removal, the total amount of time the child has been removed and the proximity of the removals to one another.

(b) Services during removal from current placement

The District provides services to a child removed from the child's current placement as follows:

- (1) If the child has been removed from the child's current placement for 10 school days or less in the school year, services are provided only to the extent that services are provided to a child without disabilities who is similarly removed;
- (2) After a child with a disability has been removed from the child's current placement for 10 school days in the same year (under circumstances in which the current removal is for not more than 10 consecutive days and is **not** a change in placement), the District provides services, as determined by school personnel in consultation with at least one of the

child's teachers, so as to enable the child to continue to participate in the general education curriculum, although in another setting, and to progress toward meeting the goals set out in the child's IEP;

- (3) If the removal is a change in placement, the child's IEP team determines appropriate services; and
- (4) If a child with a disability is removed from the child's current placement for either more than 10 consecutive days for behavior that is determined **not** to be a manifestation of the child's disability or under circumstances that constitute special circumstances, as defined below, the District ensures that the child:
 - (a) Continues to receive educational services so as to enable the child to continue to participate in the general education curriculum, although in another setting, and to progress toward meeting the goals set out in the child's IEP; and
 - (b) Receives, as appropriate, a functional behavioral assessment and behavioral intervention services and modifications that are designed to address the behavior violation so that it does not recur.

(c) Manifestation determination

Within 10 school days of any decision to change the placement of a child with a disability because of a violation of a code of student conduct, the school district, the parent and relevant members of the child's IEP team (as determined by the parent and the school district) must review all relevant information in the child's file, including the child's IEP, any teacher observations and any relevant information provided by the parents to determine if the conduct was a manifestation of the child's disability. The District determines that the conduct is a manifestation of the child's disability:

- (1) If the conduct in question was caused by, or had a direct and substantial relationship to, the child's disability; or
- (2) If the conduct in question was the direct result of the school district's failure to implement the IEP.

If the District, parents and relevant members of the IEP team determine that the conduct in question was the direct result of the school district's failure to implement the IEP, the District takes immediate steps to remedy those deficiencies.

- (1) If the conduct was a manifestation of the child's disability, the IEP team either:
 - (a) Starts to conduct a functional behavioral assessment within 10 days of the manifestation determination and complete the assessment as soon as practicable, unless the school district had conducted a functional behavioral assessment before the behavior that resulted in the change of placement occurred, and implemented a behavioral intervention plan for the child; **or**
 - (b) If a behavioral intervention plan already has been developed, within 10 days of the manifestation determination, reviews the behavioral intervention plan and the implementation of the plan, and modifies it, as necessary, to address the behavior subject to disciplinary action; **and**

- (2) Returns the child to the placement from which the child was removed, unless the parent and the District agree to a change of placement as part of the modification of the behavioral intervention plan.

(d) Special circumstances.

The District may remove a child to an interim alternative educational setting for not more than 45 school days without regard to whether the behavior is determined to be a manifestation of the child's disability, if the child:

- (1) Carries a weapon to or possesses a weapon at school, on school premises, or to or at a school function under the jurisdiction of ODE or a school district;
- (2) Knowingly possesses or uses illegal drugs, or sells or solicits the sale of a controlled substance, while at school, on school premises, or at a school function under the jurisdiction of ODE or a school district; or
- (3) Has inflicted serious bodily injury upon another person while at school, on school premises, or at a school function under the jurisdiction of ODE or a school district.

The District defines the terms controlled substance, weapon, illegal drug and serious bodily injury in accord with 3301-51-05(K)(20)(h)(i) of the Operating Standards.

On the date on which the decision is made to make a removal that constitutes a change of placement of a child with a disability because of a violation of a code of student conduct, the school district must notify the parents of that decision and provide the parents with the procedural safeguards notice described in Section B above.

(e) Expedited Due Process Hearing

The District or the parents may submit a due process complaint requesting an expedited due process hearing to appeal a decision made during disciplinary procedures.

- (1) The District may request a an expedited due process hearing if it believes that maintaining the current placement of a child is substantially likely to result in injury to the child or to others.
- (2) The parents may request an expedited due process hearing to appeal decisions regarding placement for disciplinary removals or the manifestation determination.

The District is responsible for conducting the expedited due process hearing utilizing the hearing officer appointed by ODE-OEC. The District follows the procedures that apply for other due process hearings except that the expedited due process hearing must occur within 20 school days after the date the due process complaint is filed and no extensions of time shall be granted. The hearing officer then must make a determination within 10 school days after the hearing. The District follows the expedited timelines and the procedures set forth in 3301-51-05(K)(22)(c)-(d) of the Operating Standards.

G. TRANSFER OF PARENTAL RIGHTS AT AGE OF MAJORITY/STUDENT NOTIFICATION

Once a child reaches the age of majority, the District sends all required notices to both the student and parent, unless the student has been determined incompetent under state law. If a child with a disability is incarcerated in an adult or juvenile correctional institution, prior written notices are provided to both the parents and the student.

One year before the child's 18th birthday, the District notifies both the parents and the child of the parental rights that will transfer to the child upon reaching the age of majority (age 18) and provides the child with a copy of *Whose IDEA Is This?* The District documents this notice on the child's IEP PR-07 form.

Once the child turns 18, the District obtains informed written consent, as required by the Operating Standards, from the student, unless the student has been determined incompetent under state law.

H. SURROGATE PARENTS

The District ensures that the rights of a child are protected when:

- (1) No parent, as defined in 3301-51-01 of the Operating Standards, can be identified;
- (2) The District, after making reasonable efforts, cannot locate a parent;
- (3) The child is a ward of the state; or
- (4) The child is an unaccompanied homeless youth as defined by 3301-51-05(E)(1)(d) of the Operating Standards.

One way in which the District protects the rights of such children is through the assignment of surrogate parents where appropriate. The District has a method for determining when a child needs a surrogate parent and for assigning a surrogate parent to the child, and complies with the requirements of 3301-51-05(E) of the Operating Standards regarding surrogate parents.

V. EVALUATION

The District ensures that initial evaluations are conducted and that reevaluations are completed for children residing within the District. The District uses a referral process to determine whether or not a child is a child with a disability. The District also provides interventions to assist a child who is performing below grade-level standards. The provision of intervention services is not used to unnecessarily delay a child's evaluation for purposes of determining eligibility for special education services.

A. INITIAL EVALUATION

1. TIMING AND INITIATION

The district conducts an evaluation before the initial provision of special education and related services. Either a parent of a child or a public agency may initiate a request for an initial evaluation to determine if the child is a child with a disability.

Within 30 days of receipt of a request for an evaluation, the District either obtains parental consent for an initial evaluation or provides to the parents prior written notice stating that the school district does not suspect a disability and will not be conducting an evaluation.

The initial evaluation:

- (a) Is conducted within 60 days of receiving parental consent for the evaluation unless the exception set forth in 3301-51-06(B)(5) of the Operating Standards applies; and (b)

Consists of procedures:

- (i) To determine if the child is a child with a disability as defined in 3301-51-01(B)(10) of the Operating Standards; and
- (ii) To determine the educational needs of the child.

The district obtains parental consent before conducting an evaluation. See Chapter IV, Section C, regarding parental consent requirements.

The evaluation team consists of the IEP team and other qualified professionals.

2. THE EVALUATION PLAN AND EVALUATION TEAM REPORT

As part of the initial evaluation, if appropriate, and as part of any reevaluation, the evaluation team shall develop an evaluation plan that will provide for the following and be summarized in an evaluation team report:

- (a) Review of existing evaluation data on the child, including:
 - (i) Evaluations and information provided by the parents of the child;

- (ii) Current classroom-based, local or state assessments and classroom-based observations;
- (iii) Observations by teachers and related services providers;
- (iv) Data about the child's progress in the general curriculum, or, for the preschool-age child, data pertaining to the child's growth and development;
- (v) Data from previous interventions, including:
 - (a) Interventions required by rule 3301-51-06 of the Operating Standards and
 - (b) For the preschool child, data from early intervention, community, or preschool program providers; and
- (vi) Any relevant trend data beyond the past twelve months, including the review of current and previous IEPs; and
- (b) On the basis of that review and input from the child's parents, identify what additional data, if any, are needed to determine:
 - (i) Whether the child is a child with a disability, as defined in 3301-51-01 of the Operating Standards, and the educational needs of the child;
 - (ii) In the case of a reevaluation of a child, whether the child continues to have such a disability and the educational needs of the child;
 - (iii) The present levels of academic achievement and related developmental needs of the child;
 - (iv) Whether the child needs special education and related services; or
 - (v) In the case of a reevaluation of a child, whether the child continues to need special education and related services; and
 - (vi) Whether any additions or modifications to the special education and related services are needed to enable the child to meet the measurable annual goals set out in the IEP of the child and to participate, as appropriate, in the general education curriculum.

The District administers such assessments and other evaluation measures as may be needed to produce the data identified above. The district provides prior written notice to the parents of a child with a disability that describes any evaluation procedures the school district proposes to conduct.

3. CONDUCT OF EVALUATION

In conducting the evaluation, the District:

- (a) Uses a variety of assessment tools and strategies to gather relevant functional, developmental and academic information about the child, including information provided by the parent, that may assist in determining:
 - (i) Whether the child is a child with a disability as defined in 3301-51-01(B)(10) of the Operating Standards; and
 - (ii) The content of the child's IEP, including information related to enabling the child to be involved in and progress in the general education curriculum (or for a preschool child to participate in appropriate activities);

- (b) Does not use any single measure or assessment as the sole criterion for determining whether a child is a child with a disability and for determining an appropriate educational program for the child; and
- (c) Uses technically sound instruments that may assess the relative contribution of cognitive and behavioral factors, in addition to physical or developmental factors.

The District ensures that:

- (a) Assessments and other evaluation materials used to assess a child:
 - (i) Are selected and administered so as not to be discriminatory on a racial or cultural basis;
 - (ii) Are provided and administered in the child's native language or other mode of communication and in the form most likely to yield accurate information about what the child knows and can do academically, developmentally and functionally, unless it is clearly not feasible to so provide or administer;
 - (iii) Are used for the purposes for which the assessments or measures are valid and reliable;
 - (iv) Are administered by trained and knowledgeable personnel; and
 - (v) Are administered in accordance with any instructions provided by the producer of the assessments.
- (b) Assessments and other evaluation materials include those tailored to assess specific areas of educational need and not merely those that are designed to provide a single general intelligence quotient.
- (c) Assessments are selected and administered so as best to ensure that if an assessment is administered to a child with impaired sensory, manual or speaking skills, the assessment results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure rather than reflecting the child's impaired sensory, manual or speaking skills (unless those skills are the factors that the test purports to measure);
- (d) A school age child is assessed in all areas related to the suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status and motor abilities;
- (e) Preschool children are assessed in the following developmental areas: adaptive behavior, cognition, communication, hearing, vision, sensory/motor function, social-emotional functioning and behavioral function.
- (f) Assessments of children with disabilities who transfer from one school district to another school district in the same school year are coordinated with the children's prior and subsequent schools, as necessary and as expeditiously as possible, consistent with 330151-06(B)(5)(b) and (B)(6) of the Operating Standards, to ensure prompt completion of the full evaluations.
- (g) In evaluating each child with a disability under 3301-51-06(E)-(G) of the Operating Standards, the evaluation is sufficiently comprehensive to identify all of the child's special education and related service needs, whether or not commonly linked to the disability category in which the child has been classified.

- (h) Assessment tools and strategies that provide relevant information that directly assists persons in determining the educational needs of the child are provided.
- (i) Medical consultation shall be encouraged for a preschool or school-age child on a continuing basis, especially when school authorities feel that there has been a change in the child's behavior or educational functioning or when new symptoms are detected; and
- (j) For preschool-age children, as appropriate, the evaluation shall include the following specialized assessments:
 - (i) Physical examination completed by a licensed doctor of medicine or doctor of osteopathy in cases where the disability is primarily the result of a congenital or acquired physical disability;
 - (ii) Vision examination conducted by an eye care specialist in cases where the disability is primarily the result of a visual impairment; and
 - (iii) An audiological examination completed by a certified or licensed audiologist in cases where the disability is primarily the result of a hearing impairment.

B. ELIGIBILITY DETERMINATION AND EVALUATION TEAM REPORT

1. COMPLETION OF THE EVALUATION TEAM REPORT

The following occurs upon completion of the administration of assessments and other evaluation measures:

- (a) The IEP team and other qualified professionals and the parent of the child determines whether the child is a child with a disability, in accordance with the Operating Standards; and
- (b) The District provides a copy of the evaluation report and the documentation of determination of eligibility at no cost to the parent.

The written evaluation team report shall include:

- (a) A summary of the information obtained during the evaluation process; and
- (b) The names, titles and signatures of each team member, including the parent, and an indication of whether or not they are in agreement with the eligibility determination. Any team member who is not in agreement with the team's determination of disability shall submit a statement of disagreement.

The District provides a copy of the evaluation team report and the documentation of determination of eligibility or continued eligibility to the parents prior to the next IEP meeting and in no case later than 14 days from the date of eligibility determination.

2. DETERMINATION OF ELIGIBILITY

A child is not determined to be a child with a disability:

- (a) If the determinant factor for that determination is:

- (i) Lack of appropriate instruction in reading, including the essential components of reading instruction as defined in Section 1208(3) of the Elementary and Secondary Act of 1965, as amended and specified in the No Child Left Behind Act of 2002, January 2002, 20 U.S.C. 6301 (ESEA);
- (ii) Lack of appropriate instruction in math; or
- (iii) LEP; and
- (b) If the child does not otherwise meet the eligibility criteria under 3301-51-01(B)(10) of the Operating Standards.

The district, in interpreting evaluation data for the purpose of determining if a child is a child with a disability, does the following:

- (a) Draws upon information from a variety of sources, including aptitude and achievement tests, state and district wide assessments, parent input and teacher recommendations, as well as information about the child's physical condition, social or cultural background and adaptive behavior; and
- (b) Ensures that information obtained from all of these sources is documented and carefully considered.

If a determination is made that a child has a disability and needs special education and related services, the District develops an IEP for the child.

C. REEVALUATIONS

The District conducts reevaluations of a child with a disability:

- (a) If the District determines that the child's educational or related services needs, including improved academic achievement and functional performance, warrant a reevaluation; or
- (b) If the child's parent or teacher requests a reevaluation; or
- (c) When a child transitions from pre-school to school-aged services; or (d) In order to make a change in disability category.

A reevaluation may not occur more than once a year, unless the parent and the District agree otherwise.

A reevaluation must occur at least once every three years, unless the parent and the District agree that a reevaluation is unnecessary.

The District evaluates a child with a disability before determining that child is no longer a child with a disability, although this evaluation is not required if the child's eligibility terminates due to graduation from secondary school with a regular diploma or due to exceeding the age eligibility for FAPE under state law. If a child's eligibility terminates for one of these reasons, the District provides the child with a summary of the child's academic achievement and

functional performance, which shall include recommendations on how to assist the child in meeting the child's postsecondary goals.

D. IDENTIFYING CHILDREN WITH SPECIFIC LEARNING DISABILITIES (SLD)

The District has written procedures for the implementation of the evaluation process the District uses to determine the existence of a specific learning disability (SLD). In addition, the District uses the form required by ODE-OEC, Evaluation Team Report PR-06 and completes Part 3: Documentation for Determining the Existence of a Specific Learning Disability of PR-06 when the District suspects the child has a SLD.

(1) DETERMINING THE EXISTENCE OF A SPECIFIC LEARNING DISABILITY

The parents, the IEP team, and a group of qualified professionals from the District determine that a child has a SLD if:

- (a) The child does not achieve adequately for the child's age or to meet state-approved grade-level standards in one or more of the following areas, when the District provides learning experiences and instruction appropriate for the child's age or state-approved grade-level standards: (i) Oral expression;
 - (ii) Listening comprehension;
 - (iii) Written expression;
 - (iv) Basic reading skill;
 - (v) Reading fluency skills;
 - (vi) Reading comprehension;
 - (vii) Mathematics calculation; or
 - (viii) Mathematics problem-solving;

AND

- (b) The child does not make sufficient progress to meet age or state-approved grade-level standards in one or more of the areas identified in number 1, above, when the District uses an evaluation process to determine the child's response to scientific, research-based intervention;

OR

- (c) The child exhibits a pattern of strengths and weaknesses in performance, achievement, or both, relative to age, state-approved grade-level standards, or intellectual development, when the District uses appropriate assessments consistent with 3301-51-06(E) and (F) of

the Operating Standards that the group has determined to be relevant to the identification of a SLD.

Alternatively, the District may choose a third method of evaluation, for determining if a child has a SLD. The District seeks prior approval from ODE-OEC if it chooses to use an alternative research-based assessment procedure to determine if a child has a SLD.

(2) USE OF AN EVALUATION PROCESS BASED ON THE CHILD’S RESPONSE TO SCIENTIFIC, RESEARCH-BASED INTERVENTION FOR SLD DETERMINATION

If the District uses an evaluation process based on the child’s response to scientific, research based intervention to determine whether a child has a SLD. The District ensures that this process:

- (a) Begins when the District has gathered and analyzed sufficient data from scientifically based instruction and targeted and intensive individualized interventions that provide evidence that the child’s needs are unlikely to be met without certain specialized instruction, in addition to the regular classroom instruction;
- (b) Employs interventions that are scientifically-based and provided at appropriate levels of intensity, frequency, duration and integrity, relative to the child’s identified needs;
- (c) Is based on results of scientifically-based, technically adequate assessment procedures that assess ongoing progress while the child is receiving scientifically-based instruction and the results of these procedures have been reported to the child’s parents; and
- (d) Includes the analysis of data described in 3301-51-06(H)(3)(b)(i) and (H)(3)(b)(ii) of the Operating Standards to determine whether a discrepancy is present between the child’s actual and expected performance, in both the child’s rate of progress in developing skills, and in the child’s level of performance on measures assessing one or more of the academic areas listed in 3301-51-06(H)(3)(a)(i) of the Operating Standards

The District will not use this process to delay unnecessarily a child’s referral for a comprehensive evaluation to determine eligibility for special education services.

(3) ADDITIONAL REQUIREMENTS FOR SLD DETERMINATION

The District ensures that the following additional requirements are satisfied when determining if a child has a SLD:

Inclusion of additional required group members for SLD determination

The group that determines that a child suspected of having a SLD is a child with a disability includes the child’s parents and a group of qualified professionals consisting of, but not limited to:

- (a) In the case of a school-age child, the child’s regular teacher (or if the child does not have a regular teacher, the District includes a regular classroom teacher qualified to teach a child of the child’s age);

- (b) In the case of children less than school-age, an individual qualified by ODE to teach a child of the child's age; and

At least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, speech-language pathologist or remedial reading teacher.

Observation requirements

The District ensures that the child is observed in the child's learning environment, including the regular classroom setting, to document the child's academic performance and behavior in the areas of difficulty. The group of qualified professionals identified by the District conducts the observation by:

- (a) Using information from an observation of the child's performance conducted during routine classroom instruction, including monitoring of the child's performance during instruction, that was done before the child was referred for an evaluation; or
- (b) Having at least one member of the group conduct an observation of the child's academic performance in the regular classroom after the child has been referred for an evaluation and parent consent has been obtained.

In the case of a child of less than school-age or a child who is out of school, the District ensures that a group member observes the child in an environment appropriate for a child of that age.

Ensuring the child's underachievement is not due to a lack of appropriate instruction in reading and math

In order to ensure that underachievement in a child suspected of having a SLD is not due to lack of appropriate instruction in reading or math, the District considers:

- (a) Data demonstrating that prior to, or as part of, the referral process, the child received appropriate instruction in regular education settings delivered by qualified personnel; and
- (b) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of the child's progress during instruction, the results of which were provided to the child's parents.

Obtaining parental consent to evaluate

The District promptly requests parental consent to evaluate a child to determine if the child needs special education and related services:

- (a) If prior to the referral, the child does not make adequate progress after an appropriate period of time when provided with appropriate instruction. To make this determination, the District considers:
 - (i) Data demonstrating that prior to, or as part of, the referral process, the child received appropriate scientifically-based instruction in regular education settings delivered by qualified personnel; and

- (ii) Data-based documentation of repeated assessments of achievement at reasonable intervals, reflecting formal assessment of the child's progress during instruction, the results of which were provided to the child's parents; and (b) Whenever a child is referred for an evaluation.

Consideration of exclusionary factors

When determining that a child has a SLD, the District ensures that the findings from the evaluation process are not primarily the result of:

- (a) A visual, hearing, or motor disability;
- (b) Mental retardation;
- (c) Emotional disturbance;
- (d) Cultural factors;
- (e) Environmental or economic disadvantage; or (f) LEP.

If the District determines that one of these factors is the primary reason for the child's suspected disability, the District does not identify the child as having a SLD.

VI. INDIVIDUALIZED EDUCATION PROGRAMS (IEPs)

The District ensures that an IEP is developed and implemented for each child with a disability, ages 3 through 21, inclusive, who requires special education and related services and who resides in the district. For all children with disabilities for whom our district is the district of residence, the District is responsible for ensuring that the requirements of 3301-51-07 of the Operating Standards are met regardless of which district, county board of MR/DD, or other educational agency implements the child's IEP.

The meeting to develop an IEP is conducted within 30 days of a decision that a child needs special education and related services.

The initial IEP is developed within whichever of the following time periods is the shortest:

- (a) Within 30 calendar days of the determination that the child needs special education and related services;
- (b) Within 90 days of receiving informed parental consent for an evaluation; or
- (c) Within 120 calendar days of receiving a request for an evaluation from a parent or school district (unless the evaluation team has determined it does not suspect a disability).

The District ensures that the parents receive a copy of the child's IEP at no cost to the parents. The parents may receive a copy of the IEP either at the conclusion of the IEP meeting or within 30 calendar days of the date of the IEP meeting.

A. MEMBERS OF THE IEP TEAM

The IEP team includes:

- (1) The child's parents;
- (2) Not less than one of the child's regular education teachers, if the child is or may be participating in the regular education environment;
- (3) Not less than one special education teacher of the child or, where appropriate, not less than one special education provider of the child;
- (4) A representative of the school district who:
 - a) Is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities;
 - b) Knows the general education curriculum; and
 - c) Knows about the availability of resources of the school district.
- (5) Someone who can interpret the instructional implications of the evaluation results, who may be one of the team noted previously;
- (6) At the discretion of the parents or the school district, other individuals who have knowledge or special expertise regarding the child, including related services personnel as appropriate; and
- (7) The child, whenever appropriate. The child must be invited if a purpose of the meeting is the consideration of postsecondary goals for the child and the transition services needed to assist the child in reaching those goals.

A member of the IEP team, other than the parent and the child if appropriate, is not required to attend an IEP team meeting, in whole or in part, if the parent and the district agree, in writing, that the attendance of that member is not necessary because the member's area of the curriculum or related services is not being modified or discussed at the meeting or portion of the meeting.

B. PARENTAL PARTICIPATION

The District takes steps to ensure that one or both of the parents of a child with a disability are present at each IEP team meeting or are afforded the opportunity to participate, including:

- (1) Notifying the parents of the meeting early enough to ensure that they will have an opportunity to attend; and
- (2) Scheduling the meeting at a mutually-agreed upon time and place.

A Notice to a Parent Regarding an IEP meeting:

- (1) Indicates the purpose, time and location of the meeting and who will be in attendance; and
- (2) Informs the parents of the provisions of the Operating Standards regarding the participation of other individuals who have knowledge or special expertise about the child and the participation of the Part C service coordinator or other representatives of the part C system at the initial IEP team meeting for a child previously served under Part C. See 3301-51-07(J)(2)(a)(ii) of the Operating Standards.

Beginning no later than the first IEP to be in effect when the child turns 14, the Notice also:

- (1) Indicates that a purpose of the meeting will be the development of a statement of the transition needs of the child; and
- (2) Indicates that the District will invite the child.

Beginning no later than the first IEP to be in effect when the child turns 16, the Notice also:

- (1) Indicates that a purpose of the meeting will be the consideration of the postsecondary goals and transition services for the child;
- (2) Indicates that the school district will invite the child; and
- (3) Identifies any other agency that will be invited to send a representative, if the parents consent.

The District conducts IEP team meetings without a parent in attendance only if it cannot convince parents that they should attend. Before an IEP team meeting is held without a parent, the District makes multiple attempts to contact a parent to arrange a mutually agreed on time and place, and records its attempts to do so.

C. CONTENTS OF AN IEP

The District uses ODE's required form, PR-O7, for its IEPs.

In developing each child's IEP, the IEP team considers:

- (1) The strengths of the child;
- (2) The concerns of the parents for enhancing the education of their child;
- (3) The results of the initial or most recent evaluation of the child;
- (4) The results of the child's performance on any state or district-wide assessment programs, as appropriate; and
- (5) The academic, developmental and functional needs of the child.

Further, the IEP team considers the following special factors:

- (1) In the case of a child whose behavior impedes the child's learning or that of others, the use of positive behavioral interventions and supports, and other strategies, to address that behavior;
- (2) In the case of a child with LEP, the language needs of the child as those needs relate to the child's IEP;
- (3) In the case of a child who is blind or visually impaired, the instruction of that child in accordance with the Operating Standards and section 3323.011 of the Revised Code;
- (4) The communication needs of the child, including those of a child who is deaf or hard of hearing; and
- (5) Whether the child needs assistive technology devices and services.

(1) CONTENTS OF EVERY IEP

The District's IEPs are written, and are developed, reviewed and revised in IEP meetings. The District's IEPs include all of the following:

- (a) A statement that discusses the child's future and documents planning information;
- (b) A statement of the child's present levels of academic and functional performance, including:
 - (1) How the child's disability affects the child's involvement and progress in the general education curriculum (i.e., the same curriculum as for nondisabled children); or
 - (2) For preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;
- (c) A statement of measurable annual goals, including academic and functional goals and benchmarks or short-term objectives designed to:
 - (1) Meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum; and
 - (2) Meet each of the child's other educational needs that result from the child's disability;
- (d) A description of:
 - (1) How the child's progress toward meeting the annual goals described in the IEP will be measured; and
 - (2) When periodic reports on the progress the child is making toward meeting the annual goals will be provided;
- (e) A statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child:
 - (1) To advance appropriately toward attaining the annual goals;
 - (2) To be involved in and make progress in the general education curriculum in accordance with the Operating Standards, and to participate in extracurricular and other nonacademic activities; and
 - (3) To be educated and participate with other children with disabilities and nondisabled children, as appropriate, in the activities described in 3301-51-07(H)(1)(e) of the Operating Standards;
- (f) An explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular classroom and in activities;
- (g) A statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on state and districtwide assessments consistent with Section 612(a)(16) of the IDEA;
- (h) If the IEP team determines that the child must take an alternate assessment instead of a particular regular state or districtwide assessment of student achievement, a statement of why:
 - (1) The child cannot participate in the regular assessment; and
 - (2) The particular alternate assessment selected is appropriate for the child; and
- (i) The projected date for the beginning of the services and modifications described in the IEP and the anticipated frequency, location and duration of those services and modifications.

(2) TRANSITION SERVICES

The District's IEPs address transition services as follows:

- (a) For children age 14 or over (or younger, if determined appropriate by the IEP team), the IEP includes a statement, updated annually, of the transition service needs of the child under the applicable components of the child's IEP that focuses on the child's courses of study (such as participation in advanced-placement courses or a vocational education program.); and
- (b) Beginning not later than the first IEP to be in effect when the child turns 16 (or younger if determined appropriate by the IEP team), the IEP includes:
 - (1) Appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment and, where appropriate, independent living skills; and
 - (2) The transition services (including courses of study) needed to assist the child in reaching those goals.

(3) TRANSFER OF RIGHTS AT AGE OF MAJORITY

Beginning not later than one year before the child reaches 18 years of age, the IEP includes a statement that the child has been informed of the child's rights under Part B of the IDEA that will transfer to the child on reaching the age of majority.

(4) NONACADEMIC SERVICES, PHYSICAL EDUCATION, EXTENDED SCHOOL YEAR AND TRANSPORTATION

If appropriate, the IEP includes the services to be provided in each of these areas.

D. REVIEW AND AMENDMENT OF AN IEP

The District ensures that the IEP team:

- (1) Reviews the child's IEP periodically, but not less than annually, to determine whether the annual goals for the child are being achieved; and
- (2) Revises the IEP, as appropriate, to address:
 - (a) Any lack of expected progress toward the annual goals and in the general education curriculum;
 - (b) The results of any reevaluation;
 - (c) Information about the child provided to, or by, the parents as part of an evaluation or reevaluation;
 - (d) The child's anticipated needs; or
 - (e) Other matters; and
- (3) Reconvenes if an agency, other than the school district, fails to provide the transition services described in the IEP.

Changes to the IEP may be made either at an IEP team meeting, or by a written document amending or modifying the IEP, if the parent of the child and the District agree not to convene an IEP team meeting for the purposes of making those changes. If the IEP is amended by written document, without a meeting of the IEP team, the District ensures that the IEP team is informed of the changes made. When an IEP is amended, the District sends a copy of the amended IEP to the parent within thirty days of the date the IEP was amended.

VII. LEAST RESTRICTIVE ENVIRONMENT (LRE)

The District ensures that, to the maximum extent appropriate, children with disabilities, including children in public or nonpublic institutions or other care facilities, are educated with children who are nondisabled. Placement of students with disabilities in special classes, separate schooling or other removal from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services, modifications and/or accommodations cannot be achieved satisfactorily.

The District ensures that a continuum of alternative placements is available to meet the needs of children with disabilities for special education and related services in the least restrictive environment (LRE).

The District determines the placement of a child with a disability at least annually, and the placement is based on the child's IEP, and is as close as possible to the child's home.

Unless the IEP of a child with a disability requires some other arrangement, the child is educated in the school that the child would attend if nondisabled.

In selecting the LRE for a child with a disability, the IEP team considers any potential harmful effect on the child or on the quality of the services that the child needs.

A child with a disability is not removed from education in age-appropriate regular classrooms solely because of needed modifications in the general education curriculum.

VIII. PARENTALLY PLACED NONPUBLIC SCHOOL CHILDREN

A. CHILD FIND

(1) GENERALLY

The District locates, identifies and evaluates all children with disabilities who are enrolled by their parents in chartered and non-chartered nonpublic schools, including religious elementary and secondary schools located within the District's geographical boundaries.

The District consults with the nonpublic school representatives and representatives of parents of parentally placed nonpublic school children with disabilities regarding the child find process, including:

- (a) How parentally placed nonpublic school children suspected of having a disability can participate equitably; and
- (b) How parent, teachers and nonpublic school officials will be informed of the child find process.

After timely and meaningful consultation with representatives of nonpublic schools, the District carries out child find activities for parentally placed nonpublic school children, including children whose parents live out-of-state. These activities are similar to the child find activities the District conducts for its public school children and ensures an accurate count of children with disabilities. The District completes these activities in a time period comparable to that for children attending its public schools, including completing any evaluations within 60 days of receiving parental consent. See Chapter V, Section A(1).

The District follows all IDEA and FERPA confidentiality requirements when serving children with disabilities attending nonpublic schools located within the District's boundaries and obtains parental consent before releasing any personally identifiable information about a child to officials of the child's district of residence or the nonpublic school in which the child is enrolled.

The District conducts, either directly or through contract, a full and individual initial evaluation of any parentally placed nonpublic school child suspected of having a disability who is enrolled in a nonpublic school within the District's boundaries. The District obtains written parental consent before conducting an initial evaluation.

- (a) If the parents of a parentally placed nonpublic school child do not provide consent or fail to respond to the District's request for consent to evaluate the child, the District may not use mediation or due process procedures to pursue the evaluation. The District does not have to consider this child as eligible for services.
- (b) If the parents do not make clear their intent to keep their child enrolled in the nonpublic school, the District provides the parents of a child who is determined to be eligible for special education services written documentation stating that the child's school district of residence is responsible for making FAPE available to the child.
- (c) The District sends a copy of this documentation to the child's district of residence, provided the District obtains written parental consent to release the information.

The District conducts reevaluations of parentally placed nonpublic school children with disabilities receiving special education and any related services to determine continued eligibility for services. The District conducts reevaluations no more than once a year, unless the parents and the District agree otherwise, and at least once every three years, unless the parents and the district agree that a reevaluation is unnecessary.

(2) AUTISM SCHOLARSHIP PROGRAM PARTICIPANTS

The District assumes responsibility for the initial evaluations and re-evaluations of children who reside in the District and desire to participate in the Autism Scholarship Program. The district where the nonpublic school is located conducts all reevaluations for children with disabilities

participating in the Autism Scholarship Program. (See 3301-51-08(R)(1) of the Operating Standards). The District creates the IEP that is required for eligible children who reside within the District to participate in the Autism Scholarship Program.

B. CONSULTATION

The District consults with nonpublic school representatives and representatives of parents who have placed their children with disabilities in nonpublic schools in a timely and meaningful way during the design and development of special education and related services for the children regarding the following:

(1) CHILD FIND

See above requirements.

(2) PROPORTIONATE SHARE OF FUNDS

- (a) The determination of the proportionate share of federal IDEA Part B funds available to serve parentally-placed nonpublic school children with disabilities;
- (b) The determination of how the proportionate share of those funds was calculated; and (c) Consideration of the number of children and their needs and location.

“Proportionate share” refers to the amount of federal IDEA Part B funds the District must expend to provide the group of parentally-placed nonpublic school children with disabilities with equitable participation in services funded with federal IDEA Part B funds. The District follows the formula in 3301-51-05(E)(1)–(4) of the Operating Standards to calculate the proportionate amount.

(3) CONSULTATION PROCESS

- (a) How the consultation process will bring together District representatives, nonpublic school officials and representatives of parentally placed nonpublic school children with disabilities;
- (b) How the process will take place throughout the school year to ensure that parentally placed nonpublic school children with disabilities identified through the child find can meaningfully participate in special education and related services.

(4) PROVISION OF SPECIAL EDUCATION AND RELATED SERVICES

- (a) How, where and by whom special education and related services will be provided;
- (b) The types of services, including direct services and alternate service delivery mechanisms;

- (c) How special education and related services will be apportioned if funds are insufficient to serve all parentally placed nonpublic school children; and (d) How and when these decisions will be made.

(5) WRITTEN EXPLANATION BY THE SCHOOL DISTRICT

How the District will provide the nonpublic school officials a written explanation of the reasons why the District chose not to provide services directly or through a contract if the District disagrees with the views of the nonpublic school officials on the provision of services or the types of services.

The District obtains a written affirmation signed by representatives of the participating nonpublic schools that timely and meaningful consultation has occurred. If representatives of the participating nonpublic schools do not provide the affirmation within a reasonable period of time or choose not to participate under the proportionate share provisions of IDEA and engage in consultation, the District documents its consultation attempts and forwards the documentation to the ODE-OEC. If a nonpublic school located within the boundaries of the District chooses not to participate, the parents may contact the District to request services for the child.

C. RIGHTS TO SERVICES

The District is not required to pay for the cost of education, including special education and related services, of a child with a disability, enrolled at a nonpublic school or facility if: (1) The child's district of residence made FAPE available to the child; and
(2) The parents elected to place the child in the nonpublic school.

The District includes these children and their needs in the population being considered when making decisions about services to be provided to parentally placed nonpublic school children with disabilities.

If the parents make clear their intention to keep their child with a disability enrolled in the nonpublic school, the child's district of residence does not need to develop an IEP for the child. If the child with a disability re-enrolls in the District, the District makes FAPE available.

D. EQUITABLE SERVICES DETERMINED

The District makes the final decisions about the services to be provided through a services plan to eligible parentally placed nonpublic school children with disabilities who are attending nonpublic schools within the District's geographic boundaries. The District makes these

decisions after consultation with nonpublic school representatives and parents of parentally placed nonpublic school children and through meetings to develop, review and revise services plans. A child with a disability attending a nonpublic school does not have an individual right to receive some or all of the special education and related services that the child would receive if enrolled in a public school.

E. EQUITABLE SERVICES PROVIDED

(1) THE SERVICES PLAN

- (a) The District, whether or not it is the child's school district of residence, convenes the services plan meeting, conference call, or video conference for each eligible child who will receive special education and any related services for children who attend nonpublic schools located within the District's geographical boundaries.
- (b) The District determines required participants at the services meeting.
- (c) The District ensures that a nonpublic school representative participates in the development or revision of the services plan.
- (d) The District conducts a meeting, conference call, or video conference at least annually to review and revise, if appropriate, each child's services plan.
- (e) The District uses the ODE required Services Plan PR-09 form for individually developing a services plan for each participating child that describes the specific special education and related services that the District will provide to the child. Parentally placed nonpublic school children with disabilities may receive a different amount of services than children with disabilities enrolled in the District.

(2) PROVISION AND LOCATION OF SERVICES

- (a) District personnel provide services to parentally placed nonpublic school children who attend nonpublic schools located within the District's geographical boundaries or the District provides services through a contract with an individual, association, agency, organization or other entity.
- (b) The District ensures that special education and related services, including materials and equipment, provided to parentally placed nonpublic school children with disabilities are secular, neutral and non-ideological.
- (c) The District, in consultation with the nonpublic school, will determine where services will be provided. Services may be provided on or off the premises of the nonpublic school. The District may provide services at the nonpublic school with the permission of that school.

(3) TRANSPORTATION

- (a) The District provides transportation to parentally placed nonpublic school children with disabilities who attend nonpublic schools located within the District's geographical boundaries if the services being provided under IDEA are being delivered at a location other than the nonpublic school the child is attending. The District provides transportation:

- (1) From the child's nonpublic school or the child's home to the site other than the nonpublic school; and
- (2) From the service site to the nonpublic school or to the child's home depending on the timing of the services;
- (b) The District may include the cost of transportation to special education and related services that are being delivered at a location other than the nonpublic school in calculating whether it has met the requirements of spending a proportionate amount of federal funds that it receives to serve children with disabilities; and
- (c) The District provides transportation to all children, with and without disabilities, who reside within the District and who are parentally placed in chartered nonpublic schools following the requirements in ORC 3327.01.

F. DUE PROCESS COMPLAINTS AND COMPLAINTS TO ODE

Due process rights do not apply to the provision of special education and related services the District has agreed to provide through a services plan. However, the parents of a child with a suspected disability, or a child identified as having a disability, who is enrolled in a nonpublic school, have the right to file a due process complaint against the District where the nonpublic school is located regarding that District's failure to meet the child find requirements, including location, identification, evaluation and reevaluation of the child.

If the District receives a due process complaint requesting a due process hearing from the parents of parentally placed nonpublic school child, the District follows the procedures that apply to other due process complaints.

The parents of a child with a disability, who has been unilaterally placed in a nonpublic school, have the right to file a formal written complaint with ODE-OEC regarding a number of different issues, which are listed in 3301-51-08(L)(3) of the Operating Standards.

APPENDIX A

When to Provide

Prior Written Notice, Informed Consent and Procedural Safeguards Notice (*Whose IDEA Is This?*)

Steps in the Special Education Process	Action Required		
	Notification or Informed Consent	Prior Written Notice to Parents PR-01	Whose IDEA Is This?
1. Procedural safeguards must be provided to the parents once a year			X
2. Procedural safeguards must be provided upon request of the parents			X
3. Initial referral for a suspected disability		X	X
4. Initial evaluation	Informed consent (Parent Consent for Evaluation PR-04 form)	X	
5. Eligibility determination		X	
6. IEP meeting	Notification (Parent Invitation to Meeting PR-02 form)	Provide after an IEP, if parents do not agree or do not attend the meeting	
7. Reevaluation with assessments conducted	Informed consent (Parent Consent for Evaluation PR-04 form)	Provide before, and after if parents do not agree or disability category changes	
8. Reevaluation without further assessments conducted	Notification	May use this form to notify before, and provide after, if parents do not agree or disability category changes	
9. No reevaluation conducted		X	
10. Transfers from out of state and out of district	Informed consent (Parent Consent for Evaluation PR-04 form) (If an evaluation is to be conducted)	Provide only after an IEP, if parents do not agree	If moved from out of state
11. Change of placement	Informed consent (IEP PR-07 form)	Provide only after an IEP, if parents do not agree	
12. Change in the type and amount of services		Provide only after an IEP, if parents do not agree	
13. Exit from special education	Notification (Summary of performance if graduating or aging out of special education)	X	
14. District refuses services requested by parents		X	
15. District proposes/refuses to change disability category		X	
16. Releasing personally identifiable information	Informed consent (written consent)		
17. Destruction of personally identifiable information	Notification prior to destruction		
18. Transfer of parental rights	Statement included in IEP PR-07 form		X

19. Upon receipt of the first due process complaint or upon receipt of first state complaint in school year			X
20. Disciplinary change in placement		X	X
21. Revocation of consent		X	

Appendix A

July 1, 2009

Prior Written Notice, Informed Consent and Procedural Safeguards Notice (*Whose IDEA Is This?*)

1. Procedural safeguards must be provided to the parents once a year.

The school district must give a copy of the **procedural safeguards notice (*Whose IDEA Is This?*)** to the parents at least once a year, except as noted below:

- Upon initial referral or the parents request for evaluation;
- Upon request by the parents;
- Upon receipt of the first due process complaint or state complaint in a school year; and
- Upon a change in placement for disciplinary action.

2. Procedural safeguards must be provided upon request of the parents.

The school district must give a copy of the **procedural safeguards notice (*Whose IDEA Is This?*)** to the parents whenever the parents request.

3. Initial referral for a suspected disability

On the date of the referral, the district must provide the parents with a copy of the **procedural safeguards notice (*Whose IDEA Is This?*)**. For a parental referral, the date of referral is the date that the district received either the verbal or written request from the parents to conduct an evaluation. For a district referral, the date of referral is the date that the screening or review team decided an evaluation should be conducted. See Evaluation – 6.2 Request and Referral for Initial Evaluation. Within 30 days of the date of initial referral by the parents for a suspected disability, the district must provide the **Prior Written Notice to Parents PR-01** form to the parents if the district does not suspect a disability.

4. Initial evaluation

Within 30 days of the date of initial referral by the parents for a suspected disability, the district must provide the **Prior Written Notice PR-01** form to the parents and receive written, **informed consent (Parent Consent for Evaluation PR-04 form)** from the parents prior to conducting any assessments as part of an initial evaluation. A description of any evaluation procedures the district proposes to conduct must also be provided to the parents. (If the notice relates to an action proposed by the district that also requires parental consent, the district may give notice at the same time it requires parental consent.)

5. Eligibility determination

If the evaluation team determines that a child is not eligible for special education and related services the district will provide the parents the **Prior Written Notice to Parents PR-01** form once this determination is made. If the evaluation team determines that a child is eligible for special education and related services, see Item number 6, IEP Meeting.

6. IEP Meeting

The district must use the required **Parent Invitation PR-02** form to notify and invite the parents to an IEP meeting. Districts must take steps to ensure that one or both parents are present at each IEP meeting or are afforded the opportunity to participate. This requires that the district:

- Notify the parents of the IEP meeting early enough to ensure that they have an opportunity to attend; and
- Schedule the meeting at a mutually agreed upon time and place.

A district must provide the **Prior Written Notice to Parents PR-01** form after an IEP meeting, if the parents do not agree with the IEP or any portion of the IEP or do not attend the meeting.

Appendix A July 1, 2009

A district must provide **prior written notice** to the parents and receive **written, informed consent** from the parents before the initial placement of a child in special education. The **IEP PR-07** form serves as prior written notice unless the parents disagree with the IEP. Written informed consent to initiate special education and related services is provided through the parents' signature on the IEP form.

7. Reevaluation with assessments conducted

A district must provide the **Prior Written Notice to Parents PR-01** form and obtain **informed parental consent (Parent Consent for Evaluation PR-05 form)** before conducting any tests or assessments as part of a reevaluation of a child with disabilities, unless the district has provided notice and the parents have failed to respond to reasonable attempts to obtain consent.

The district must provide the **Prior Written Notice to Parents PR-01** form after the reevaluation is completed, if the parents disagree with the reevaluation or the reevaluation results in a change in the child's disability category.

8. Reevaluation without further assessments conducted

If the evaluation team determines that no additional data are needed to determine that the child continues to be a child with a disability and to determine the child's educational needs, the evaluation team must notify the child's parents. The notification that no further assessments are necessary must include:

- The team's determination and the reasons for the determination; and
- The parents' right to request an assessment to determine whether the child continues to be a child with a disability and to determine the child's educational needs.

The **Prior Written Notice to Parents PR-01** form may be used for this notification as long as it includes the information listed directly above.

The district must provide the **Prior Written Notice to Parents PR-01** form after the reevaluation is completed, if the parents disagree with the reevaluation or the reevaluation results in a change in the child's disability category.

9. No reevaluation conducted

If the IEP team, including the parents, agrees that a reevaluation of a child is unnecessary, the district must provide the **Prior Written Notice to Parents PR-01** form.

10. Transfers from out of state and out of district

Upon the enrollment of a child with an existing IEP from another district or state, the district must convene the IEP team and determine if the team will accept the existing IEP or change the existing

IEP. If the parents disagree with the IEP team on the IEP that will be implemented by the district, the **Prior Written Notice to Parents PR-01** form must be provided to the parents. See IEP – 7.1 General.

Transfers from out of state

If the child moved into the district from another state, the district must provide the parents with a copy of the **procedural safeguards notice (Whose IDEA Is This?)**.

If the district determines that a new evaluation is necessary for a child who transfers from out of state, the evaluation is considered an initial evaluation and the district must provide the **Prior Written Notice to Parents PR-01** form and obtain written parental consent (**Parent Consent for Evaluation PR-05** form). See Evaluation – 6.2 Request and Referral for Initial Evaluation.

Transfers from out of district

If the child transfers into the district from another district in the state, the district provides the parents with a copy of the **procedural safeguards notice (Whose IDEA Is This?)** if the sending school district had not provided the parents with a copy during the current school year.

If the IEP team refers a child who transfers from another district in the state for additional evaluation, the evaluation is considered to be a reevaluation. The district must provide the **Prior Written Notice to the Parents PR-01** form and obtain written parental consent (**Parent Consent for Evaluation PR-05** form). See Evaluation – 6.5 Reevaluation.

11. Change of placement

The district must provide the **Prior Written Notice to Parents PR-01** form after an IEP meeting, if the parents do not agree with the IEP team's proposed change of placement on the continuum of alternative placement options. The district may not change the child's placement until the parents consent to the proposed change of placement.

12. Change in the type and amount of services

The district must provide the **Prior Written Notice to Parents PR-01** form after an IEP meeting, if the parents do not agree with the changes in the types and amount of services being proposed. The district may then proceed to implement the IEP.

13. Exit from special education

The district must provide the **Prior Written Notice to Parents PR-01** form whenever a child exits special education. In addition, for a child whose eligibility for special education terminates because the child is graduating with a regular diploma or exceeding the age eligibility for special education, the school district must provide the child with a **summary of the child's academic achievement and functional performance**, which shall include recommendations on how to assist the child in meeting the child's postsecondary goals.

14. District refuses services requested by parents

The district must provide the **Prior Written Notice to Parents PR-01** form to the parents any time the district refuses the request of the parents to provide special education and related services to the child.

15. District proposes/refuses to change disability category

The district must provide the **Prior Written Notice to Parents PR-01** form to the parents any time the district proposes or refuses to change the child's disability category. The ETR and the documentation of eligibility can be considered a prior written notice if all the elements required in a prior written notice are present in the ETR and determination of eligibility.

16. Releasing personally identifiable information

The district must obtain **written parental consent** prior to releasing any personally identifiable information about the child to any person or agency not entitled by law to see it, and to a representative of any participating agency that is likely to be responsible for providing or paying for transition services.

17. Destruction of personally identifiable information

The school district must inform the parents when personally identifiable information collected, maintained and used is no longer needed to provide educational services to the child. The information must be destroyed at the request of the parents. However, a permanent record of a child's name, address, telephone number, grades, attendance record, classes attended, grade level completed and year completed shall be maintained without time limitation. This **notification may be in writing or provided verbally**. If provided verbally, the school district should document this notification in the child's education record.

18. Transfer of parental rights

One year before the child's 18th birthday, the district must notify both the child and the parents of the parental rights, under Part B, that will transfer to the child upon reaching the age of majority. The district also must provide the child with a copy of the **procedural safeguards notice (Whose IDEA Is This?)**. This notification is documented on the child's **IEP PR-07** form.

19. Upon receipt of the first due process complaint or upon receipt of the first state complaint in the school year

The school district must give the parents a copy of the **procedural safeguards notice (Whose IDEA Is This?)** upon receipt of the parents' first due process request. The Ohio Department of Education, Office for Exceptional Children gives the parents a copy of the **procedural safeguards (Whose IDEA Is This?)** upon the parents' filing of the first state complaint within the school year.

20. Disciplinary change in placement

Whenever a change of placement occurs due to disciplinary action, a copy of the **procedural safeguards notice (Whose IDEA Is This?)** and **Prior Written Notice PR-01** form must be provided.

21. Revocation of consent (must be in writing)

The district must provide the **Prior Written Notice to Parents PR-01** form if the parents of a child with a disability revoke consent in writing for the continued provision of all special education and related services. This notice must include:

- A summary of all of the supports and services the child will no longer receive, and any change in educational placement that will occur as a result of the revocation of consent.
- Statements that once the revocation takes effect, the district will not be considered to be in violation of its requirement to make FAPE available, is not required to convene an IEP meeting or develop an IEP, is not required to conduct a three year reevaluation, is not required to offer the child the discipline protections available under IDEA and is not required to amend the child's education records to remove any reference to the child's receipt of special education and related services.
- A statement that by revoking consent for special education and related services for the child, the parent is not waiving the right to request an initial evaluation or to receive services in the future.



Policy 3.03
Appendix B.

Positive Behavior Intervention and Supports and Restraint and Seclusion Model Policy and Procedures

Adopted on:

March 8, 2022

Date

By:

Lawrence County DD

District

July 2021

I. Policy Rationale and Philosophy:

Efforts should be made to prevent the use of restraint and the use of seclusion. A non-aversive effective behavioral system such as Positive Behavior Intervention and Supports (PBIS) shall be used to create a learning environment that promotes the use of evidence-based behavioral interventions, thus enhancing academic, social and behavioral outcomes for all students.

LCDD believes the school environment should be one that ensures the care, safety and welfare of all students and staff members. Efforts to promote positive interactions and solutions to potential crises should be used. If a student's behavior presents a threat of immediate harm to the student or others, the use of approved physical restraint or seclusion to maintain a safe environment may be used as a last resort.

II. Definitions: The following terms are used throughout the policy and are provided for reference. They also can be found in [Ohio Administrative Code \(OAC\) 3301-35-15](#).

- a. **Aversive behavioral interventions**
Interventions that are intended to induce pain or discomfort to a student for the purpose of eliminating or reducing maladaptive behaviors, including such interventions as application of noxious, painful and/or intrusive stimuli, including any form of noxious, painful or intrusive spray, inhalant or taste or other sensory stimuli such as climate control, lighting and sound.
- b. **Behavior Intervention Plan**
A comprehensive plan for managing problem behavior by changing or removing contextual factors that trigger or maintain it by strengthening replacement skills, teaching new skills and providing PBIS and services to address behavior.
- c. **Chemical Restraint**
A drug or medication used to control a student's behavior or restrict freedom of movement.
- d. **De-escalation Techniques**
Interventions used to prevent violent and aggressive behaviors and reduce the intensity of threatening, violent and/or disruptive incidents.
- e. **Functional Behavior Assessment**
 - i. A school-based process for students with disabilities and students without disabilities that includes a student's parent and, as appropriate, the child to determine why a child engages in challenging behaviors and how the behavior relates to the child's environment.
 - ii. Consent from the parent and, as appropriate, the child (18 years of age or older) is to be obtained at the initial Functional Behavior Assessment.
- f. **Mechanical Restraint**
Any method of restricting a student's freedom of movement, physical activity or normal use of the student's body by using an appliance or device manufactured for this purpose.
- g. **Physical Escort**
The temporary touching or holding of the hand, wrist, arm, shoulder, waist, hip or back for the purpose of inducing a student to move to a safe location.

h. Physical Restraint

- i. The use of physical contact in a way that immobilizes or reduces the ability of a student to move the student's arms, legs, body or head freely. Such term does not include a physical escort, mechanical restraint or chemical restraint.
- ii. Physical restraint may be used only when there is an immediate risk of physical harm to the student or others and no other safe or effective intervention is available. Physical restraint only may be used in a manner that is age and developmentally appropriate.
- iii. Physical restraint does not include brief, physical contact for the following or similar purposes:
 - 1. To break up a fight.
 - 2. To knock a weapon away from a student's possession.
 - 3. To calm or comfort.
 - 4. To assist a student in completing a task/response if the student does not resist the contact.
 - 5. To prevent immediate risk of injury to the student or others.

i. PBIS

- i. A multi-tiered, schoolwide, behavioral framework developed and implemented for the purpose of improving academic and behavior outcomes and increasing learning for all students.
- ii. A schoolwide systematic approach to embed evidence-based practices and data-driven decision-making to improve school climate and culture to achieve improved academic and behavior outcomes and increase learning for all students.
- iii. Encompasses a wide range of systemic and individualized positive strategies to teach students schoolwide behavior expectations, reinforce desired behaviors and diminish reoccurrences of challenging behaviors.

j. PBIS Leadership Team

The assigned team at the district and building level that plans, coaches and monitors PBIS in the district and building. PBIS leadership teams may include, but are not limited to, school administrators, teacher representatives across grade levels and programs, staff able to provide behavioral expertise and other representatives identified by the district or school, such as bus drivers, food service staff, custodial staff and paraprofessionals.

k. Prone Restraint

A physical or mechanical restraint while the individual is in the facedown position.

l. Seclusion

The involuntary isolation of a student in a room, enclosure or space from which the student is prevented from leaving by physical restraint or by a closed door or other physical barrier. It does not include a time out.

m. Time out

A behavioral intervention in which a student, for a limited and specified time, is separated from the class within the classroom or in a non-locked setting for the purpose of self-regulating and controlling the student's own behavior. In a time out, the student is not physically restrained or prevented from leaving the area by physical barriers.

III. PBIS Framework:

LCDD will implement PBIS on a systemwide basis in accordance with [Ohio Revised Code \(ORC\) 3319.46](#) and [OAC 3301-35-15](#).

- a. The framework will include:
 - i. A decision-making framework that consists of multiple school staff members who guide selection, integration and implementation of evidence-based academic and behavior practices for improving academic and behavior outcomes for all students.
 - ii. The following integrated elements:
 - 1. Data-based decision-making (to select, monitor and evaluate outcomes, practices and systems).
 - 2. Evidence-based practices along a multi-tiered continuum of supports.
 - 3. Systems that enable accurate and sustainable implementation of practices.
 - 4. Progress monitoring for fidelity and target outcomes.
- b. Standards for LCDD implementation of PBIS framework include:
 - i. Student personnel to receive professional development in accordance with [OAC 3301-35-51](#) (C).
 - ii. Explicit instruction of schoolwide behavior expectations.
 - iii. Consistent systems of acknowledging and correcting behaviors.
 - iv. Teaching environments designed to eliminate behavior triggers.
 - v. Family and community involvement.

IV. Professional Development for the Implementation of PBIS:

The following are requirements for professional development to be received by student personnel to implement PBIS on a systemwide basis:

- a. Occurs at least every three years.
- b. Provided by a building or district PBIS team or appropriate state, regional or national source in collaboration with the building or district PBIS team.
- c. The trained PBIS leadership team will provide professional development to the school or district in accordance with the district's developed PBIS training plan. The district will retain records of completion of the professional development.
- d. The following topics, as required by [OAC 3301-35-15](#):
 - i. Overview of PBIS.
 - ii. Process for teaching behavioral expectations.
 - iii. Data collection.
 - iv. Implementation of PBIS with fidelity.
 - v. Consistent systems of feedback to students for acknowledgment of appropriate behavior and corrections for behavior errors.
 - vi. Consistency in discipline and discipline referrals.
- e. LCDD can accept any professional development or continuing education provided in accordance with [ORC 3319.237](#) (B), as long as the professional development or continuing education meets the professional development requirements of divisions [OAC 3301-35-15\(C\)\(4\)](#).
- f. LCDD will ensure continuous training structures are in place to provide ongoing coaching and implementation with fidelity.
- g. The above requirements in Section IV may be appropriately modified for the intended audience.

V. Training and Professional Development for the use of Crisis Management and De-escalation Techniques, Restraint and Seclusion:

LCDD will ensure an appropriate number of personnel in each building are trained annually in evidence-based crisis management and de-escalation techniques, as well as the safe use of physical restraint and seclusion. The minimum training requirements are as follows:

- a. Proactive measures to prevent the use of seclusion or restraint.
- b. Crisis management.
- c. Documentation and communication about the restraint or seclusion with appropriate parties.
- d. Safe use of restraint and seclusion.

- e. Instruction and accommodation for age and body size diversity.
- f. Directions for monitoring signs of distress during and following physical control.
- g. Debriefing practices and procedures.
- h. Is a face-to-face training.
- i. Allow for a simulated experience of administering and receiving physical restraint.
- j. Ensure that participants will demonstrate proficiency in the above-mentioned items in Section V.

VI. Additional Requirements for Training and Professional Development for PBIS and Restraint and seclusion:

- a. The school district will maintain written or electronic documentation on training provided and lists of participants in each training.
- b. The school district will ensure an appropriate number of student personnel shall be trained annually on the requirements of this policy, [OAC 3301-35-15](#) and the district's procedures regarding restraint and seclusion.
- c. The school district will have a plan regarding training student personnel as necessary to implement PBIS on a systemwide basis.

VII. District Monitoring:

- a. The district shall establish a procedure to monitor the implementation of this policy.
- b. This policy and subsequent procedures shall be accessible on the district's website.
- c. The district is responsible for notifying all parents annually of its policies and procedures concerning seclusion and restraint.

VIII. Requirements for the use of Restraint:

Physical restraint may be applied only if there is an immediate risk of physical harm to the student or others and no other safe or effective intervention is available. If physical restraint is applied, the staff must:

- a. Be appropriately trained.
- b. Implement in a manner that accommodates age and body size diversity.
- c. Ensure safety of other students and protect the dignity and safety of the student involved.
- d. Combine use with other approaches (non-physical interventions always are preferred) that will diminish the need for physical intervention in the future.
- e. Use the least amount of force necessary for the least amount of time necessary.
- f. Ensure physical restraint does not interfere with a student's ability to communicate in the student's primary language or mode of communication.
- g. Continually observe the student in restraint for indications of physical or mental distress and contact appropriate personnel if needed according to the district's crisis policy.
- h. Remove the student from physical restraint promptly once the risk of physical harm to self or others has dissipated.
- i. If at any point the staff assesses that the intervention is insufficient to maintain safety of all involved, contact emergency personnel.

IX. Prohibited Practices for Use of Physical Restraint:

Staff members are not to use prohibited physical restraints for which they have not been trained by the district and are not to use any unauthorized physical restraints. This includes, but is not limited to:

- a. Prone restraint, including:
 - i. The intentional knowing or reckless use of any technique that involves the use of pinning down a student by placing knees to the torso, head and or neck of the student; and
 - ii. Use of any method that can cause loss of consciousness or harm to the neck or restricting respiration in any way.
- b. Chemical restraint.
- c. Mechanical restraint.

- d. Corporal punishment.
- e. Deprivation of basic needs.
- f. Restraint of preschool children in violation of [OAC 3301-37-10](#) (D).
- g. Child endangerment, as defined in [ORC 2919.22](#).
- h. Aversive behavioral interventions.
- i. Using pressure point, pain compliance or joint manipulation techniques.
- j. Dragging or lifting of the student by the hair or ear or any type of mechanical restraint.
- k. Using other students or untrained staff to assist with the hold or restraint.
- l. Securing a student to another student or fixed object.

X. Requirements Following an Incident of Physical Restraint:

If a physical restraint occurs, staff is required to:

- a. Immediately or within 24 hours report the incident to a building administrator and the parent/guardian.
- b. Attempt to contact parent/guardian during the same day of incident or within 24 hours.
- c. Complete an Incident Report and any other district-required reports following the physical restraint, which will:
 - i. Include staff's observations of the student.
 - ii. Include documented attempts to contact the parent/guardian following the physical restraint.
 - iii. Be completed within (district input time frame – not to exceed 24 hours);
 - iv. Be provided to district administration within (district time frame – not to exceed 24 hours).
 - v. Be made available to parent/guardian within 24 hours.
 - vi. Be maintained by the school district in the student file.
- d. Debrief following the restraint, with all involved staff, the student and parents/guardians (if possible) to include:
 - i. Utilizing information from the district's incident report.
 - ii. The trigger for the incident and staff response.
 - iii. Methods to address the student's behavioral needs.
 - iv. Completion of a Functional Behavior Assessment and/or a Behavior Intervention Plan if this behavior is noted as a pattern of behavior that leads to the use of restraint.

XI. Requirements for Use of Seclusion:

Seclusion may be applied only if there is an immediate risk of physical harm to the student or others and no other safe or effective intervention is available. If seclusion occurs, staff must:

- a. Be appropriately trained.
- b. Implement in a manner that is age and developmentally appropriate.
- c. Ensure safety of other students and protect the dignity and respect of the student involved.
- d. Combine use with other approaches (non-physical interventions always are preferred) that will diminish the need for seclusion in the future.
- e. Use the least amount of time necessary.
- f. Continually observe the student in seclusion for indications of physical or mental distress and contact appropriate emergency entities according to district crisis policy.
- g. Only utilize a room or area that:
 - i. Provides for adequate space, lighting and ventilation.
 - ii. Has clear visibility for the safety of the student.
 - iii. Is not locked.
- h. Cease seclusion when the immediate risk of physical harm to self or others has dissipated.
- i. If at any point the staff assesses that the intervention is insufficient to maintain safety of all involved, contact emergency personnel.

XII. Prohibited Practices for Use of Seclusion:

Staff members are not to use seclusion for which they have not been trained by the district and are not to use any prohibited seclusion. Prohibited seclusion includes but is not limited to:

- a. Use of seclusion in any environment that does not meet the above criteria in Section XI.
- b. Corporal punishment.
- c. Seclusion of preschool children in violation of [OAC 3301-37-10](#) (D).
- d. Child endangerment, as defined in [ORC 2919.22](#).
- e. Aversive behavioral interventions.
- f. Seclusion cannot not be used:
 - i. As a form of discipline/punishment.
 - ii. As a means to coerce or retaliate or in a manner that endangers a student.
 - iii. For the convenience of staff.
 - iv. As a substitute for inadequate staff.
 - v. As a substitute for an educational program.
 - vi. As a substitute for less restrictive alternatives.
 - vii. As a substitute for staff training in positive behavior supports or another crisis prevention program.

XIII. Requirements Following an Incident of Seclusion:

If seclusion occurs, staff are required to:

- a. Immediately or within 24 hours report the incident to a building administrator and the parent/guardian.
- b. Attempt to contact parent/guardian during the same day or within 24 hours of the incident.
- c. Complete an Incident Report and any other district-required reports following the seclusion, which will:
 - i. Include staff's observations of the student.
 - ii. Include documented attempts to contact the parent/guardian following the seclusion.
 - iii. Be completed within (district input time frame—not to exceed 24 hours).
 - iv. Be provided to district administration within (district time frame).
 - v. Be made available to parent/guardian within 24 hours.
 - vi. Be maintained by the school district in the student file.
- d. Following the seclusion, debrief with all involved staff, the student and parents/guardians (if possible) to include:
 - i. Utilizing information from the district's incident report.
 - ii. The trigger for the incident and staff response.
 - iii. Methods to address the student's behavioral needs.
 - iv. Completion of a Functional Behavior Assessment and/or a Behavior Intervention Plan if this behavior is noted as a pattern of dangerous behavior that leads to the use of seclusion.

XIV. Multiple Incidents of Restraint and Seclusion:

After a student's third incident of physical restraint or seclusion in a school year, a meeting will occur within 10 school days of the third incident as follows:

- a. For students who have Individualized Education Programs (IEP) or 504 plans, the requirements are as follows:
 - i. The student's individualized education program (IEP) or 504 team will meet to consider the need to conduct or develop a Functional Behavioral Assessment or Behavior Intervention Plan or amend an existing Functional Behavioral Assessment or Behavior Intervention Plan.
- b. For all other students, the requirements are as follows:
 - i. A team, consisting of the parent, an administrator or designee, a teacher of the student, a staff member involved in the incident (if not the teacher or administrator already

invited) and other appropriate staff members will meet to discuss the need to conduct or review a Functional Behavioral Assessment and/or develop a Behavior Intervention Plan.

- c. LCDD may choose to complete a Functional Behavioral Assessment or Behavior Intervention Plan for any student who might benefit from these measures but has fewer than three incidents of restraint or seclusion.

XV. Reporting and Notification to the Ohio Department of Education:

LCDD will annually report information regarding its use of restraint and seclusion to the Ohio Department of Education in the form and manner prescribed by the Department.

XVI. Complaint:

LCDD will create a complaint procedure for parents.

- a. Parents will present written complaints to the superintendent of the school district to initiate a complaint investigation by the school district regarding an incident of restraint or seclusion.
- b. The district will respond to the parent's complaint in writing within 30 days of the filing of a complaint regarding an incident of restraint or seclusion and will make reasonable efforts to have an in-person follow up meeting with the parents: and
- c. The district also will advise parents of the additional complaint options available to them as outlined in [OAC 3301-35-15](#) (L).

SERVICE AND SUPPORT ADMINISTRATION

- A. The Lawrence County Board of Developmental Disabilities (hereinafter referred to as the “Board”) shall provide Service and Support Administration in accordance with ORC 5126.15 and OAC 5123:2-1-11. Service and Support Administration supports individuals in determining and pursuing goals and maintains the individual as the focus while coordinating services across multiple systems.

- B. Decision-making Responsibility
 - 1. Each individual, including an individual who has been adjudicated incompetent pursuant to Chapter 2111 of the ORC, has the right to participate in decisions that affect the individual’s life and to have what is important to the individual and what is important for the individual supported.
 - 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, 5124, or 5126 of the ORC. 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 ORC, authorize an adult (who may be referred to as a “chosen representative”) to make a decision described in section (B)(2) of this policy 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 section (B)(2) of this policy on behalf of the individual within the scope of the guardian’s authority. This shall not be construed to require appointment of a guardian.
 - 5. An adult or guardian who makes a decision pursuant to section (B)(3) or (B)(4) if this policy 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 what is important to the individual, what is important for the individual, and the individual’s desired outcomes.

- C. The Board shall provide service and support administration to the following:
 - 1. An individual regardless of age or eligibility for county board services who is applying for or is enrolled on a HCBS waiver;
 - 2. An individual three years of age or older who is eligible for county board services and requests service and support administration, or has services requested on their behalf pursuant to section (B) of this policy.
 - 3. An individual residing in an intermediate care facility who requests, or a person on the individual’s behalf requests pursuant to section (B) of this policy, assistance to move from the intermediate care facility to a community setting.

- D. An individual who is eligible for service and support administration in accordance with section (C) of this policy and requests, or a person on the individual’s behalf requests pursuant to section (B) of this policy, service and support administration shall receive service and support administration and shall not be placed on a waiting list for service and support administration.

- E. The Board shall identify a Service and Support Administrator (SSA) for each individual receiving service and support administration who shall be the primary point of coordination for the individual. An individual shall be given the opportunity to request a different SSA. The SSA shall perform the following duties with the active participation of the individual and members of the team:
1. Initially, and at least every twelve months thereafter, coordinate assessment of the individual.
 - a. The assessment shall take into consideration:
 1. What is important to the individual to promote satisfaction and achievement of desired outcomes;
 2. What is important for the individual to maintain health and welfare;
 3. Known and likely risks;
 4. The individual's place on the path to community employment; and
 5. The Individual's skills and abilities.
 - b. The assessment shall identify supports that promote the individual's:
 1. Communication (expressing oneself and understanding others);
 2. Advocacy and engagement (valued roles and making choices; responsibility and leadership);
 3. Safety and security (safety and emergency skills; behavioral well-being; emotional well-being; supervision considerations);
 4. Social and spirituality (personal networks, activities, and faith, friends and relationships);
 5. Daily life and employment (school and education, employment, finance);
 6. Community Living (life at home, getting around); and
 7. Healthy living (medical and dental care, nutrition, wellness)
 2. Develop, review, and revise the individual's Individual Service Plan (ISP) using person-centered planning and ensure that the ISP:
 - a. Reflects results of the assessment;
 - b. Includes services and supports that:
 1. Ensure health and welfare;
 2. Assist the individual to engage in meaningful and productive activities;
 3. Support community connections and networking with persons or groups including persons with disabilities and others;
 4. Assist the individual to improve self-advocacy skills, and increase the individual's opportunities to participate in advocacy activities, to the extent desired by the individual;
 5. Ensure achievement of outcomes that are important to the individual and outcomes that are important for the individual and address the balance of any conflicts between what is important to the individual and what is important for the individual;
 6. Address identified risks and include support to prevent or minimize risks;
 - c. Integrates all sources of services and supports including natural supports and alternative services, available to meet the individual's needs and desired outcomes;
 - d. Reflects services and supports that are consistent with efficiency, economy, and quality of care; and
 - e. Is updated throughout the year.

3. Establish a recommendation for and obtain approval of the budget for services based on the individual's assessed needs and preferred ways of meeting those needs;
4. Through objective facilitation, assist the individual in choosing providers by:
 - a. Ensuring that the individual is given the opportunity to select providers from all willing and qualified providers in accordance with applicable federal and state laws and regulations, including 5123:9-11 of the OAC; and
 - b. Assisting the individual as necessary to work with providers to resolve concerns involving a provider or direct support staff who are assigned to work with the individual;
5. Secure commitments from providers to support the individual in achievement of his or her desired outcomes;
6. Verify by signature and date that prior to implementation each ISP;
 - a. Indicates the provider frequency, and funding source for each service and support; and
 - b. Specifies which provider will deliver each service or support across all settings;
7. Establish and maintain contact with providers as frequently as necessary to ensure that each provider is trained on the ISP and has a clear understanding of the expectations and desired outcomes of the supports being provided;
8. Establish and maintain contact with natural supports as frequently as necessary to ensure that natural supports are available and meeting desired outcomes as indicated in the ISP;
9. Facilitate effective communication and coordination among the individual and members of the team by ensuring that the individual and each member of the team has a copy of the current ISP unless otherwise directed by the individual, the individual's guardian, or the adult whom the individual has identified, as applicable. The individual and his or her providers shall receive a copy of the ISP at least fifteen calendar days in advance of implementation unless extenuating circumstances make fifteen-day advance copy impractical and with agreement by the individual and his or her providers.
10. Assure that all dissenting opinions to the ISP are specifically noted in writing and are attached to the ISP.
11. Provide ongoing coordination to ensure services and supports are provided in accordance with the ISP, and to the benefit and satisfaction of the individual. Ongoing ISP coordination shall:
 - a. Occur with the active participation of the individual and members of the team;
 - b. Focus on achievement of the desired outcomes of the individual;
 - c. Balance what is important to the individual, and what is important for the individual;
 - d. Examine service satisfaction (i.e. what is working for the individual and what is not working); and
 - e. Use the ISP as the fundamental tool to ensure the health and welfare of the individual.
11. Review and revise the ISP at least every twelve months and more frequently under the following circumstances:
 - a. At the request of the individual or a member of the team, in which case revisions to the ISP shall occur within thirty calendar days of the request;
 - b. Whenever the individual's assessed needs, situation, circumstances, or status changes;
 - c. If the individual chooses a new provider or type of service or support;
 - d. As a result of reviews conducted in accordance with the continuous review process;
 - e. Identified trends and patterns of unusual incidents or major unusual incidents; and
 - f. When services are reduced, denied, or terminated by Ohio Department of

Developmental Disabilities (DODD) or the Ohio Department of Medicaid.

12. Take the following actions with regard to Medicaid services:
 - a. Explain to the individual, in conjunction with the process of recommending eligibility and/or assisting the individual in making application for enrollment in a HCBS waiver or any other Medicaid service, and in accordance with rules adopted by DODD;
 1. Alternative services available to the individual;
 2. The individual's due process and appeal rights; and
 3. The individual's right to choose any qualified and willing provider.
 - b. Explain to the individual, at the time the individual is being recommended for enrollment in a HCBS waiver:
 1. Choice of enrollment in a HCBS waiver as an alternative to intermediate care facility placements; and
 2. Services and supports funded by a HCBS Waiver.
 - c. Provide an individual with written notification and explanation of the individual's right to a Medicaid state hearing if the ISP process results in a recommendation for approval, reduction, denial, or termination of services funded by a HCBS waiver. Notice shall be provided in accordance with section 5101.35 of the ORC.
 - d. Make a recommendation to DODD, in accordance with rule 5123-8-01 of OAC, as to whether the individual meets the criteria for a developmental disabilities level of care.
 - e. Explain to an individual whose ISP includes services funded by a HCBS waiver or other Medicaid services that the services are subject to approval by DODD and the Ohio Department of Medicaid. If DODD or the Ohio Department of Medicaid approves, reduces, denies, or terminates services funded by a HCBS waiver or other Medicaid services included in an ISP, the SSA shall communicate with the individual about this action.
13. Provide an individual with written notification and explanation of the individual's right to use the administrative resolution of complaint process set forth in OAC 5123-4-04 if the ISP process results in the reduction, denial, or termination of a service other than a service funded by a HCBS waiver or Targeted case management services. Such written notice and explanation shall also be provided to an individual if the ISP process results in an approved service that the individual does not want to receive, but is necessary to ensure the individual's health safety, and welfare. Notice shall be provided in accordance with OAC 5123-4-04.
14. Advise members of the team of their right to file a complaint in accordance with OAC 5123-4-04.
15. Retain responsibility for all decision-making regarding service and support administration functions and the communication of any such decisions to the individual.
16. Take actions necessary to remediate any immediate concerns regarding the individual's health and welfare.
17. Implement a continuous review process to ensure that ISPs are developed and implemented in accordance with this policy.
 - a. The continuous review process shall be tailored to the individual and based on information provided by the individual and the team.
 - b. The scope, type, and frequency of review shall be specified in the individual service plan and shall include, but are not limited to:
 1. Face-to-face visits, occurring at a time and place convenient for the individual, at least annually or more frequently as needed by the individual; and

2. Contact via phone, e-mail, or other appropriate means as needed.
 - c. The frequency of reviews may be increased when:
 1. The individual has intensive behavioral or medical needs;
 2. The individual has an interruption of services of more than thirty calendar days;
 3. The individual encounters a crisis or multiple less serious but destabilizing events within a three-month period;
 4. The individual has transitioned from an intermediate care facility to a community setting within the past twelve months;
 5. The individual has transitioned to a new provider of homemaker/personal care within the past twelve months;
 6. The individual receives services from a provider that has been notified of DODD's intent to suspend or revoke the provider's certification or license; or
 7. Requested by the individual, the individual's guardian, or the adult, whom the individual has identified, as applicable.
 - d. The SSA shall share results of reviews in a timely manner with the individual, the individual's guardian, and /or the adult whom the individual has identified as applicable, and the individual's providers, as appropriate.
 - e. If the continuous review process indicates areas of non-compliance with standards for providers of services funded by a HCBS waiver, the Board shall conduct a provider compliance review in accordance with OAC 5123-2-04.
- F. The Assessment SSA shall establish an individual's eligibility for county board services in accordance with rules adopted by the DODD. Eligibility results shall be shared in a timely manner with the individual and the individual's guardian, and/or the adult whom the individual has identified, as applicable, as well as with the SSA who is the primary point of coordination for the individual.
- G. The Service and Support Administration department shall establish an on-call emergency response system that is available twenty-four hours per day, seven days per week to provide immediate response to an unanticipated event that requires an immediate change in an individual's existing situation and/or ISP to ensure health and safety.
- H. Records shall be maintained on individuals receiving service and support administration and shall include at the minimum, the following:
1. Identifying data;
 2. Information identifying guardianship, other adult whom the individual has identified, trusteeship, or protectorship;
 3. Date of request for services from the county board;
 4. Evidence of eligibility for county board services;
 5. Assessment information relevant to the request for services and the planning process for supports and services;
 6. Current ISP;
 7. Current budget for supports and services;
 8. Documentation of provider selection process;
 9. Documentation of unusual incidents;
 10. Major unusual incident investigation summary reports;
 11. The name of the Service and Support Administrator;
 12. Emergency Information;

13. Personal financial information, when appropriate;
 14. Release of information and consent forms;
 15. Case notes which include coordination of services and supports and continuous review process activities; and
 16. Documentation that the individual was afforded due process.
- I. Due process shall be afforded to each individual receiving service and support administration pursuant to section 5101.35 of ORC for services funded by a home and community-based services waiver and targeted case management services or pursuant to rule 5123-4-04 of OAC for services other than services funded by a home and community-based services waiver and targeted case management services.

Revised: 12/14/2021
Revised: 10/20/2015
Adopted: 2/21/06

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 3.05 - FAMILY SUPPORT SERVICES

I. Introduction

The Lawrence County Developmental Disabilities (DD) will provide funding for Family Support Services (FSS). The FSS provides funding for families to care for their family member with a developmental disability at home by assisting with specific expenses, such as respite care and needed supplies and services. Also, the funding is to enhance the quality of life for the family, including the individual with developmental disabilities.

II. Family Support Services

- A. This fund will be the payer of last resort.
- B. The funds allocated to this program will be approved annually by the Board based on available funds.
- C. A family is eligible for FSS if their household includes a child or adult with a developmental disability who has been determined eligible by Lawrence County DD. Funds are distributed on a first come, first serve basis and the family's income is not considered in determining eligibility for the FSS program.
- D. Lawrence County Developmental Disabilities reserves the right to assure that requested goods and services are the most cost-effective options available (without compromising quality). FSS funds will not be distributed towards goods and services that exceed the assessed need of the individual.
- E. Individuals receiving Home and Community Based Waiver Services (HCBS) and/or individuals living in an Intermediate Care Facility (ICF) or Nursing Facility are not eligible for FSS funds.
- F. The SSA director or designee shall develop procedures for the efficient and effective administration of this program. Procedures shall include the maximum amount families are eligible to receive annually, as well eligible expenses.
- G. Individuals with complaints or disagreements regarding the disbursement of these funds will be referred to the administrative resolution of complaints policy.

Revised: 1/11/22

Revised: 3/13/18

Revised: 2/16/16

Reviewed: 2/21/06

Approved: 2/22/05

GENERAL FUND REQUESTS

- A. The Board shall provide funding for short term services/assistance/emergency services to eligible individuals in a manner that empowers them to exercise choice and enhance the quality of their lives. Funding for requests is based on assessment of need by the SSA review committee, the availability of funds, and approval of the Superintendent. When feasible, the individual will participate in a repayment plan for the funds received.
- B. The Individual Service Plan (ISP) shall be developed by the individual with the support of a certified Service and Support Administrator (SSA) and other persons of the individual's choosing. The plan shall be based upon the individual's choices and shall document the services that are needed to support the choices of, and meet the needs of the individual. The Board shall promote conditions that will provide a valued lifestyle for the individual served.
- C. Individuals receiving funding for services through the fund formerly known as Supported Living prior to July 1, 2014 shall continue to receive funding for these services under the general fund. Funding for these requests are based on the availability of funds.

Revised: 8/13/19, 9/16/14

Reviewed: 2/21/06

Revised: 2/17/04

Adopted: 1/16/01

TRANSPORTATION

- A. The Agency shall ensure, within planning and priorities set forth in the Agency's strategic plan, an array of transportation services are available to eligible individuals with disabilities as defined under the Eligibility Determination Policy. The Agency shall provide transportation services through collaborative arrangements with other entities.
- B. Transportation services shall be provided in accordance with an individual's Individual Service Plan, as applicable, and shall incorporate within the ISP any specific transportation services and supports.
- C. Providers of non-medical transportation services shall follow Ohio Administrative Code Chapter 5123:2-9 Home and Community-Based Services Waiver rules as well as all other applicable federal, state and local transportation rules.
- D. Local funded specialized transportation shall be provided in compliance with OAC 5123:2-1-03. Providers shall provide services in accordance with their contracts with the Agency and the individual's ISP.
 - 1. Each contract shall specify the terms and conditions for the delivery of training, services, and supports to individuals served and shall be in compliance with applicable law.
 - 2. The Agency shall ensure that the contract meets such requirements and that contracting entities are trained in and have access to applicable rules in the Administrative Code.
 - 3. The Agency shall ensure the development and provision of appropriate annual safety instruction to all individuals who use specialized transportation and/or annually communicate safety information to appropriate family members, as applicable, and caregivers.
- E. Each provider shall annually document that all relevant rules and regulations are being followed. This documentation will also show that these contractors have been trained and have access to the appropriate rules and regulations including those federal and state regulations governing Medicaid.

Adopted: 8/13/19

HOME AND COMMUNITY-BASED SERVICES WAIVERS

- A. The Lawrence County Developmental Disabilities shall participate in the Home and Community-Based Services Waiver (HCBS) program in accordance with the OAC 5123:2-9.
- B. Requests for waivers shall be based upon the Agency's available funds for local match requirement and the staff and provider capacity to administer waiver services.
- C. Under the direction of the Superintendent, the Service and Support Administration Unit shall be responsible for the administration of the Agency's waiver program.
- D. The Agency shall use the rule referred to in paragraph A above as the Agency procedures for the HCBS Waiver program and services.

Revised: 8/13/19, 6/19/07

Approved: 2/21/06

COMPREHENSIVE SOCIAL SERVICES BLOCK GRANT

- A. The Lawrence County Board of Developmental Disabilities (hereinafter referred to as the "Board") agrees to enter into a contract with the Ohio Department of Developmental Disabilities (herein referred to as the "Department") to participate in the Comprehensive Social Services Block Grant (CFDA 93.667) dealing with developmental disabilities services.
- B. The Social Services Block Grant program is authorized under Title XX of the Social Security Act, as amended, and is codified as 42USC 1397 through 1397e.
- C. The Board agrees to work cooperatively with the Department to carry out all grant program objectives, maximize the use of Title XX federal assistance, and ensure services listed in the Comprehensive Social Services Profile are provided to developmentally disabled residents in the community.
- D. The Board agrees to provide to the Department all necessary monthly and quarterly reports, documentation of services, and eligibility information according to the guidelines established by the Department.
- E. The Board agrees to provide Title XX services as defined in the Title XX Grant Agreement between the board and DODD.
- F. The Board agrees reimbursement for Title XX services will not exceed the Department authorized Title XX allocation amount.
- G. The Board agrees to provide Title XX Services without regard to income to individuals who are determined eligible for Board services based on the Ohio Eligibility Determination Instrument (OEDI).
- H. The Board will re-determine eligibility for Title XX funded services no less than annually.
- I. The Board shall request reimbursement quarterly in accordance with Department guidelines and reimbursement shall be based on the fee schedule provided in the Title XX Service Selection & Fee Schedule provided in the Department's Title XX Grant Agreement.

Revised: 11.19.13

Revised: 9.20.11

Revised: 6.22.10

Reviewed: 2.21.06

Approved: 6.15.04

POLICY 3.11 - TARGETED CASE MANAGEMENT SERVICES

- A. The Lawrence County Board of Developmental Disabilities shall provide Targeted Case Management Services (TCM) in accordance with ORC 5126.15, OAC 5123-4-02, and OAC 5160-48-01 to eligible individuals with and developmental disabilities (DD).
- B. Targeted Case Management is services which will assist individuals in gaining access to needed medical, social, educational, and other services described in OAC 5160-48-01.
- C. The Board shall request Medicaid payment of TCM services provided to Medicaid eligible individuals in accordance with all Medicaid rules and regulations. Individuals eligible for Medicaid TCM services are:
 - 1. Medicaid eligible individuals, regardless of age, who are enrolled on home and community-based service (HCBS) waivers administered by the DODD, and
 - 2. All other Medicaid eligible individuals, age three or above, who are determined to have DD according to ORC 5126.01.
- D. The following activities are reimbursable only if provided to or on behalf of a Medicaid eligible individual and only if provided by a Board employee certified in Service and Support Administration.
 - 1. Assessment
 - 2. Care Planning
 - 3. Referral and Linkage
 - 4. Monitoring and Follow-up
 - 5. State Hearings
- E. Payment for TCM services may not duplicate payments made to the Board under other program authorities for this same purpose.
- F. The following activities are not reimbursable:
 - 1. Activities performed on behalf of an individual residing in an institution (nursing facility, ICF, or a medical institution) except for the last 180 consecutive days of residence when the activities are related to moving the individual from the institution to a community setting.
 - 2. Emergency response systems.
 - 3. Conducting investigations of abuse, neglect, unusual incidents, and major unusual incidents.
 - 4. The provision of direct services.
 - 5. Services to individuals who are determined not to have a developmental disability.
 - 6. Establishing budgets for services outside of the scope of individual assessment and care planning.
 - 7. Development, or monitoring, or implementation of an individualized education plan.
 - 8. Services to groups of individuals.
 - 9. Habilitation management.
 - 10. Eligibility determinations for county board services.
- G. Due process shall be afforded to each individual receiving TCM services.

- H. The Board shall establish policies or procedures which address TCM documentation requirements, reimbursement, claims submission, cost reports, fiscal reviews, record retention, due process and designation of local matching funds.

Revised: 3/8/22
Revised: 1/23/18
Adopted: 2/21/06

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES POLICY – 3.12 EMPLOYMENT FIRST

Lawrence County Developmental Disabilities (LCDD) supports the Employment First Initiative instituted by Executive Order 2012-05K. The Executive Order established statewide collaboration and coordination by creating the Employment First Taskforce and Advisory Committee and made competitive integrated employment the preferred outcome for individuals with developmental disabilities of working age.

The purpose of the Employment First Policy is to:

- A. Expand competitive integrated employment opportunities by reducing barriers and aligning state policy.
- B. Enhance lives by creating greater opportunities for all people to advance their careers.
- C. Provide diversity and enrichment to the community, promote equal opportunity within the community, and decrease dependency on public funding.
- D. Provide employers and their businesses with more value because of access to dependable and qualified employees.
- E. Encourage, provide, create, and reward competitive integrated employment in the workforce as the first and preferred option for all individuals with disabilities of working age that are served by LCDD.
- F. For students, LCDD staff shall collaborate with school district personnel, students, families, and other applicable entities to draft Individualized Education Programs (IEP's) and Transition Plans that consider the ultimate outcome of competitive integrated employment as the preferred option and shall work cooperatively to attain career goals. In support of this, LCDD shall develop and maintain a "Local Interagency Agreement for Transition of Students with Disabilities to the Workforce". Any decision by the student and/or family to not pursue career planning activities as part of a Transition Plan or to not consider employment in the community upon graduation from a school program shall be documented, with reasons and rationale provided.
- G. For adults, Individual Service Plans (ISP's) shall consider competitive integrated employment as the preferred option for each person served and the team shall work cooperatively with persons served to attain that career goal. Any decision to not consider competitive integrated employment for specific individuals will be re-evaluated on at least an annual basis, with the reasons and rationale for these decisions fully documented and addressed in service plans.

For purposes of the policy, LCDD shall:

- A. Recognize that employment services for individuals with developmental disabilities shall be directed at competitive integrated employment and that individuals with developmental disabilities are presumed capable of competitive integrated employment.
- B. Engage in the person-centered planning process. The purpose of a person-centered planning process is to identify an individual's unique strengths, interests, abilities, preferences, resources, and desired outcomes as they relate to competitive integrated employment. The person-centered planning process shall include identification and documentation of the individual's place on the path to competitive integrated employment. The results of the person-centered planning process shall be integrated into the individual's ISP and shall be reviewed at least annually and whenever a significant change in employment, training, continuing education, services, or supports occurs or is proposed. The ISP shall include:
 - 1. For an individual on place I or place II of the path to competitive integrated employment, the individual's desired competitive integrated employment outcome and related action steps.
 - 2. For an individual on place III of the path to competitive integrated employment, a description of the activities that will occur to advance the individual on the path to competitive integrated employment.
 - 3. For an individual on place IV of the path to competitive integrated employment, the information and support offered to the individual within the most recent twelve-month period about career options, employment opportunities, the economic impact of the individual's decision, and outcomes centered around the individual's capabilities and successes of engaging in meaningful activities within the individual's community.
- C. Incorporate Employment First principles in its strategic plan.
- D. Collect and annually submit to the Ohio Department of Developmental Disabilities individual-specific data regarding the cost of non-Medicaid employment services, employment outcomes for individuals who receive non-Medicaid employment services, and the place on the path to competitive integrated employment of individuals of working age.
- E. Develop and periodically update on-going benchmarks for increasing the number of individuals of working-age who are engaged in competitive integrated employment services.
- F. Work collaboratively with local school districts in the county to ensure a framework exists for individuals approaching completion of a school program such that the county board and school districts use similar methods to support students with developmental disabilities to obtain competitive integrated employment.
- G. Identify and attempt to resolve any duplication of efforts.

- H. Work collaboratively with workforce development agencies, vocational rehabilitation agencies, and mental health agencies to support individuals to obtain competitive integrated employment.
- I. Disseminate information to individuals served, families, schools, employers, providers of services, and community partners about resources and opportunities, including Medicaid buy-in for workers with disabilities and other work incentive programs, that facilitate competitive integrated employment.

WAIVER ADMINISTRATION CLAIMING

- A. The Lawrence County Board of MR/DD shall participate in the Waiver Administration Claiming (WAC) Program in accordance with OAC 5123:2-9-04, the requirements set forth by the ODMRDD in the Waiver Administration Claiming Guide, the Office of Budget Management Circulars and applicable federal laws, directives, and guidelines.
- B. The purpose of WAC is to draw down federal funds, also called Federal Financial Participation (FFP), from CMS for activities performed that are necessary for the administration of home and community-based services (HCBS) waivers. The Board shall use this revenue for costs associated with HCBS waiver administration functions.
- C. The Board shall follow the WAC statewide uniform methodology set forth in the ODMRDD WAC Guide. The methodology contains the following elements:
 - 1. A uniform Implementation Plan detailing how the Board will administer the WAC program at the local agency level,
 - 2. A uniform set of Waiver Activity Codes,
 - 3. A uniform Waiver Activity Form for documenting how much time was spent on Waiver administration activities;
 - 4. A uniform Waiver Administrative Invoice for request for reimbursement of payroll and fringe benefit costs;
 - 5. A standardized methodology for calculating the Waiver Eligibility Rate (WER); and
 - 6. A standardized cost reporting methodology for reporting WAC costs.
- D. The Board shall designate a WAC Coordinator who shall provide oversight for the implementation and operation of the WAC and ensure that policy decisions are implemented appropriately. The WAC Coordinator shall follow the responsibilities outlined in the ODMRDD WAC Guide.
- E. An annual Implementation Plan shall be written by the local WAC Coordinator and approved by the ODMRDD WAC Coordinator, prior to reimbursement for any claims submitted.
- F. The Board shall identify and report all HCBS waiver administration activity costs on the operating and expenditure report submitted to ODMRDD pursuant to ORC section 5126.12.
- G. The Board shall maintain an Agency Review File that consists of the documentation listed in the WAC Guide. In accordance with OAC 5123:2-9-04 (E), all records and forms shall be kept for a period of seven years from the date of receipt of payment, or for six years after any initiated audit is completed and adjudicated, whichever is longer.

This policy shall be effective July 1, 2005.



**ANTI-HARASSMENT, ANTI-INTIMIDATION OR ANTI-BULLYING
Model Policy**

Per House Bill 276 Anti-Harassment, Anti-Intimidation or Anti-Bullying
(Adopted by the State Board of Education July 10, 2007)

Per House Bill 19 Violence Within a Dating Relationship
(Adopted Amendment Section 3.1 Approved by the State Board of Education
November 9, 2010)

Adopted by Lawrence County Developmental Disabilities

**On:
February 19, 2019**

Policy 3.15



Table of Contents

1.	Executive Summary	3
2.	Ohio Department of Education Anti-Harassment, Anti-Intimidation or Anti-Bullying Model Policy	4
3.	Definition of Terms	6
4.	Types of Conduct	7
5.	Complaint Processes	7
6.	Complaints	8
6.1.	Formal Complaints	8
6.2.	Informal Complaints	9
6.3.	Anonymous Complaints	9
7.	School Personnel Responsibilities and Intervention Strategies	9
7.1.	Teachers and Other School staff	9
7.2.	Administrator Responsibilities	10
7.3.	Intervention Strategies	13
8.	Reporting Obligations	14
9.	Police and Child Protective Services	15
10.	Training	16

1. Executive Summary

- 1.1. The State Board of Education adopted anti-harassment and anti-bullying policy in October 2004. The policy is based on the belief that Ohio schools must provide physically safe and emotionally secure environments for all students and all school personnel. It is the goal of the State Board of Education, through the *Ohio School Climate Guidelines* and this policy, to enhance/create positive learning and teaching environments. The State Board of Education defines a positive climate as one that emphasizes and recognizes positive behaviors, evokes nonviolence, cooperation, teamwork, understanding and acceptance toward all students and staff in, and in transit to and from, the school environment.
- 1.2. The State Board of Education directed the Ohio Department of Education to provide schools with model policies and strategies that eliminate negative behaviors and recognize positive behaviors that promote safe and secure learning environments for all students and staff. This model policy has informed local schools as they establish policies that assist school personnel to identify and address issues of bullying, intimidation and harassment that occurs between students, groups of students and school personnel. The law only speaks to students, but the model also includes students and school personnel.
- 1.3. Per Section 3301.22 of the Ohio Revised Code, the State Board of Education shall develop a model policy to prohibit harassment, intimidation or bullying in order to assist school districts in developing their own policies under section 3313.666 of the Revised Code. The board shall issue the model policy within six months after the effective date of this section.
- 1.4. Per Section 3313.666 of the Ohio Revised Code, the board of education of each city, local, exempted village and joint vocational school district shall establish a policy prohibiting harassment, intimidation or bullying. The policy shall be developed in consultation with parents, school employees, school volunteers, students and community members. These requirements are identified with an asterisk (*) in the model policy Sections 2 & 3.1.

-
2. Ohio Department of Education Anti-Harassment, Anti-Intimidation, or Anti-Bullying Model Policy (Ohio Revised Code requirements are marked with an asterisk.)
- 2.1. It is the policy of the Board of Education that any form of bullying behavior, whether in the classroom, on school property, to and from school or at school-sponsored events, is expressly forbidden.
- 2.2. *To implement this policy, the Board of Education directs the board of education of each city, local, exempted village and joint vocational school district to establish a policy prohibiting harassment, intimidation or bullying. The policy shall be developed in consultation with parents, school employees, school volunteers, students and community members. The policy must include the following:
- 2.2.1. *A statement prohibiting harassment, intimidation or bullying of any student on school property or school-sponsored events;
 - 2.2.2. *A definition of harassment, intimidation or bullying that shall include the definition in 3.1 of this model policy;
 - 2.2.3. *A procedure for students, parents or guardians to report prohibited incidents to teachers and school administrators;
 - 2.2.4. *A requirement that school personnel report prohibited incidents they witness and/or receive reports on from students to the school principal or other administrator designated by the principal;
 - 2.2.5. *A procedure for documenting any prohibited incident that is reported;
 - 2.2.6. *A procedure for responding to and investigating any reported incident including providing intervention strategies for protecting a victim from additional harassment, intimidation or bullying, and from retaliation following a report;
 - 2.2.7. *A disciplinary procedure for any student guilty of harassment, intimidation, or bullying, which shall not infringe on any student's rights under the first amendment to the Constitution of the United States;

- 2.2.8. *A requirement that school administrators notify parents or guardians of any student involved in a prohibited incident be notified and, to the extent permitted by section 3319.321 of the Revised Code and the "Family Educational Rights and Privacy Act of 1974," 88 Stat. 571.20 U.S.C. 1232g, as amended, have access to any written reports pertaining to the prohibited incident;
 - 2.2.9. *A requirement that the district administrators semiannually provide the president of the district board a written summary of all reported incidents and post the summary on the district Web site, to the extent permitted by section 3319.321 of the Revised Code and the "Family Educational Rights and Privacy Act of 1974," 88 Stat. 571.20 U.S.C. 1232g, as amended, have access to any written reports pertaining to the prohibited incident.
 - 2.2.10. *Each board's policy shall appear in any student handbooks, and in any publications that set forth the comprehensive rules, procedures and standards of conduct for schools and students in the district. Information regarding the policy shall be incorporated into employee training materials; and
 - 2.2.11. *A school district employee, student, or volunteer shall be individually immune from liability in a civil action for damages arising from reporting an incident in accordance with a policy if that person reports an incident of harassment, intimidation or bullying promptly in good faith and in compliance with the procedures specified in the policy.
- 2.3. Students who have been determined to have engaged in prohibited behaviors are subject to disciplinary action, which may include suspension or expulsion from school. The district's commitment to addressing such prohibited behaviors, however, involves a multifaceted approach, which includes education and the promotion of a school atmosphere in which harassment, intimidation or bullying will not be tolerated by students, faculty or school personnel.
- 2.4. It is imperative that harassment, intimidation, or bullying be identified only when the specific elements of the definition are met because the designation of such prohibited incidents carry special statutory obligations. However, misconduct by one student against another student, whether or not appropriately defined or not, will result in appropriate disciplinary consequences for the perpetrator.

3. Definition of Terms

3.1. *Harassment, intimidation or bullying” means either of the following:

3.1.1. Any intentional written, verbal, graphic, or physical act that a student or group of students exhibited toward other particular student more than once and the behavior both:

3.1.1.1. *Causes mental or physical harm to the other student; and

3.1.1.2. *Is sufficiently severe, persistent or pervasive that it creates an intimidating, threatening or abusive educational environment for the other student.

3.1.2. Violence within a dating relationship.

3.2. Harassment, Intimidation or Bullying also means electronically transmitted acts i.e., Internet, cell phone, personal digital assistance (PDA) or wireless hand-held device that a student has exhibited toward another particular student more than once and the behavior both:

3.2.1. Causes mental or physical harm to the other student/school personnel; and

3.2.2. Is sufficiently severe, persistent or pervasive that it creates an intimidating, threatening or abusive educational environment for the other student/school personnel.

3.3. In evaluating whether conduct constitutes harassment, intimidation or bullying, special attention should be paid to the words chosen or the actions taken, whether such conduct occurred in front of others or was communicated to others, how the perpetrator interacted with the victim, and the motivation, either admitted or appropriately inferred.

3.4. A school-sponsored activity shall mean any activity conducted on or off school property (including school buses and other school-related vehicles) that is sponsored, recognized or authorized by the Ohio Board of Education.

4. Types of Conduct

4.1. Harassment, intimidation or bullying can include many different behaviors including overt intent to ridicule, humiliate or intimidate another student or school personnel. Examples of conduct that could constitute prohibited behaviors include:

- 4.1.1. Physical violence and/or attacks;
- 4.1.2. Threats, taunts and intimidation through words and/or gestures;
- 4.1.3. Extortion, damage or stealing of money and/or possessions;
- 4.1.4. Exclusion from the peer group or spreading rumors; and,
- 4.1.5. Repetitive and hostile behavior with the intent to harm others through the use of information and communication technologies and other Web-based/online sites (also known as "cyber bullying"), such as the following:
 - 4.1.5.1. Posting slurs on Web sites where students congregate or on Web logs (personal online journals or diaries);
 - 4.1.5.2. Sending abusive or threatening instant messages;
 - 4.1.5.3. Using camera phones to take embarrassing photographs of students and posting them online; and,
 - 4.1.5.4. Using Web sites to circulate gossip and rumors to other students;
 - 4.1.5.5. Excluding others from an online group by falsely reporting them for inappropriate language to Internet service providers.

5. Complaint Processes

5.1. Publication of the prohibition against harassment, intimidation and bullying and related procedures.

- 5.1.1. The prohibition against harassment, intimidation or bullying shall be publicized in any student handbooks and in any of the publications that set forth the comprehensive rules, procedures and standards of conduct for schools and students in the district. In addition, information regarding the policy shall be incorporated into employee training materials. The following statement shall be included:

- 5.1.2. Harassment, intimidation, or bullying behavior by any student/school personnel in the Lawrence County DD/Open Door School program is strictly prohibited, and such conduct may result in disciplinary action, including suspension and/or expulsion from school. "Harassment, intimidation, or bullying, in accordance with House Bill 276, mean any intentional written, verbal, graphic or physical acts including electronically transmitted acts i.e., Internet, cell phone, personal digital assistant (PDA), or wireless hand-held device, either overt or covert, by a student or group of students toward other students/school personnel with the intent to harass, intimidate, injure, threaten, ridicule or humiliate. Such behaviors are prohibited on or immediately adjacent to school grounds, at any school-sponsored activity, on school-provided transportation or at any official school bus stop that a reasonable person under the circumstances should know will have the effect of:
- 5.1.2.1. Causing mental or physical harm to the other student/school personnel including placing an individual in reasonable fear of physical harm and/or damaging of students'/personal property; and,
 - 5.1.2.2. Is sufficiently severe, persistent, or pervasive that it creates an intimidating, threatening, or abusive educational environment for the other student/school personnel.

6. Complaints

6.1. Formal Complaints

- 6.1.1. Students and/or their parents or guardians may file reports regarding suspected harassment, intimidation or bullying. Such written reports shall be reasonably specific including person(s) involved, number of times and places of the alleged conduct, the target of suspected harassment, intimidation and/or bullying, and the names of any potential student or staff witnesses. Such reports may be filed with any school staff member or administrator, and they shall be promptly forwarded to the building principal for review and action in accordance with Section 6.

6.2. Informal Complaints

6.2.1. Students, parents or guardians and school personnel may make informal complaints of conduct that they consider to be harassment, intimidation and/or bullying by verbal report to a teacher, school administrator, or other school personnel. Such informal complaints shall be reasonably specific as to the actions giving rise to the suspicion of harassment, intimidation and/or bullying, including person(s) involved, number of times and places of the alleged conduct, the target of the prohibited behavior(s), and the names of any potential student or staff witness. A school staff member or administrator who receives an informal complaint shall promptly document the complaint in writing, including the above information. This written report by the school staff member and/or administrator shall be promptly forwarded to the building principal for review and action in accordance with Section 6.

6.3. Anonymous Complaints

6.3.1. Students who make informal complaints as set forth above may request that their name be maintained in confidence by the school staff member(s) and administrator(s) who receive the complaint. The anonymous complaints shall be reviewed and reasonable action will be taken to address the situation, to the extent such action may be taken that (1) does not disclose the source of the complaint, and (2) is consistent with the due process rights of the student(s) alleged to have committed acts of harassment, intimidation and/or bullying.

7. School Personnel Responsibilities and Intervention Strategies

7.1. Teachers and Other School Staff

7.1.1. Teachers and other school staff, who witness acts of harassment, intimidation or bullying, as defined above, shall promptly notify the building principal and/or his/her designee of the event observed, and shall promptly file a written, incident report concerning the events witnessed. Teachers and other school staff who receive student or parent reports of suspected harassment, intimidation, and bullying shall promptly notify the building principal and/or his/her designee of such report(s). If the report is a formal, written complaint, such complaint shall be forwarded promptly (no later than the next school day) to the building principal or his/her

designee. If the report is an informal complaint by a student that is received by a teacher or other professional employee, he or she shall prepare a written report of the informal complaint which shall be promptly forwarded (no later than the next school day) to the building principal or his/her designee.

- 7.1.2. In addition to addressing both informal and formal complaints, school personnel are encouraged to address the issue of harassment, intimidation or bullying in other interactions with students. School personnel may find opportunities to educate students about harassment, intimidation and bullying and help eliminate such prohibited behaviors through class discussions, counseling, and reinforcement of socially appropriate behavior. School personnel should intervene promptly whenever they observe student conduct that has the purpose or effect of ridiculing, humiliating or intimidating another student/school personnel, even if such conduct does not meet the formal definition of "harassment, intimidation or bullying."

7.2. Administrator Responsibilities

7.2.1. Investigation

- 7.2.1.1. The principal and or his/her designee shall be promptly notified of any formal or informal complaint of suspected harassment, intimidation or bullying. Under the direction of the building principal or his/her designee, all such complaints shall be investigated promptly. A written report of the investigation shall be prepared when the investigation is complete. Such report shall include findings of fact, a determination of whether acts of harassment, intimidation or bullying were verified, and, when prohibited acts are verified, a recommendation for intervention, including disciplinary action shall be included in the report. Where appropriate, written witness statements shall be attached to the report.

- 7.2.1.2. Notwithstanding the foregoing, when a student making an informal complaint has requested anonymity, the investigation of such complaint shall be limited as is appropriate in view of the anonymity of the complaint. Such limitation of investigation may include restricting action to a simple review of the complaint (with or without discussing it with the alleged perpetrator), subject to receipt of further information and/or the withdrawal by the complaining student of the condition that his/her report be anonymous.

7.2.2. Remedial Actions

- 7.2.2.1. Verified acts of harassment, intimidation, or bullying shall result in an intervention by the building principal or his/her designee that is intended to ensure that the prohibition against harassment, intimidation or bullying behavior is enforced, with the goal that any such prohibited behavior will cease.
- 7.2.2.2. Harassment, intimidation and bullying behavior can take many forms and can vary dramatically in seriousness and impact on the targeted individual and other students. Accordingly, there is no one prescribed response to verified acts of harassment, intimidation and bullying. While conduct that rises to the level of "harassment, intimidation or bullying," as defined above will generally warrant disciplinary action against the perpetrator of such prohibited behaviors whether and to what extent to impose disciplinary action (detention, in and out-of-school suspension; or expulsion) is a matter for the professional discretion of the building principal. The following sets forth possible interventions for building principals to enforce the Board's prohibition against "harassment, intimidation or bullying."

7.2.2.2.1. Non-disciplinary Interventions

- 7.2.2.2.1.1. When verified acts of harassment, intimidation or bullying are identified early and/or when such verified acts do not reasonably require a disciplinary response, students may be counseled as to the definition of harassment, intimidation or bullying, its prohibition and their duty to avoid any conduct that could be considered harassing, intimidating or bullying.
- 7.2.2.2.1.2. If a complaint arises out of conflict between students or groups of students, peer mediation may be considered. Special care, however, is warranted in referring such cases to peer mediation. A power imbalance may make the process intimidating for the victim and therefore inappropriate. The victim's communication and assertiveness skills may be low and could be further eroded by fear resulting from past intimidation and fear of future intimidation. In such cases, the victim should be given additional support. Alternatively, peer mediation may be deemed inappropriate to address the concern.

7.2.2.2.2. Disciplinary Interventions

- 7.2.2.2.2.1. When acts of harassment, intimidation and bullying are verified and a disciplinary response is warranted, students are subject to the full range of disciplinary consequences. Anonymous complaints that are not otherwise verified, however, shall not be the basis for disciplinary action.
- 7.2.2.2.2.2. In and out-of-school suspension may be imposed only after informing the accused perpetrator of the reasons for the proposed suspension and giving him/her an opportunity to explain the situation.

- 7.2.2.2.3. Expulsion may be imposed only after a hearing before the Board of Education, a committee of the Board or an impartial hearing officer designated by the Board of Education in accordance with Board policy. This consequence shall be reserved for serious incidents of harassment, intimidation or bullying and/or when past interventions have not been successful in eliminating prohibited behaviors.

7.3. Intervention Strategies

7.3.1. General

- 7.3.1.1. In addition to the prompt investigation of complaints of harassment, intimidation or bullying and direct intervention when such prohibited acts are verified, other district actions may ameliorate any potential problem with harassment, intimidation or bullying in school or at school-sponsored activities. While no specific action is required and school needs for such interventions may vary from time to time, the following list of potential intervention strategies shall serve as a resource for administrators and school personnel:
- 7.3.1.1.1. Respectful responses to harassment, intimidation or bullying concerns raised by students, parents or school personnel;
 - 7.3.1.1.2. Planned professional development programs addressing targeted individuals' problems; including what is safe and acceptable Internet use;
 - 7.3.1.1.3. Data collection to document victim problems to determine the nature and scope of the problem;
 - 7.3.1.1.4. Use of peers to help ameliorate the plight of victims and include them in group activities;
 - 7.3.1.1.5. Avoidance of sex-role stereotyping (e.g., males need to be strong and tough);
 - 7.3.1.1.6. Awareness and involvement on the part of all school personnel and parents with regard to victim problems;
 - 7.3.1.1.7. An attitude that promotes communication, friendship, assertiveness skills and character education;
 - 7.3.1.1.8. Modeling by school personnel of positive, respectful and supportive behavior toward students;

- 7.3.1.1.9. Creating a school atmosphere of team spirit and collaboration that promotes appropriate social behavior by students in support of others (*Ohio School Climate Guidelines*);
- 7.3.1.1.10. Employing classroom strategies that instruct students how to work together in a collaborative and supportive atmosphere; and
- 7.3.1.1.11. Form harassment, intimidation and bullying task forces, programs and other initiatives involving volunteers, parents, law enforcement and community members.

7.3.2. Intervention Strategies for Protecting Victims

- 7.3.2.1. Supervise and discipline offending students fairly and consistently;
- 7.3.2.2. Provide adult supervision during recess, lunch time, bathroom breaks and in the hallways during times of transition;
- 7.3.2.3. Maintain contact with parents and guardians of all involved parties;
- 7.3.2.4. Provide counseling for the victim if assessed that it is needed;
- 7.3.2.5. Inform school personnel of the incident and instruct them to monitor the victim and the offending party for indications of harassing, intimidating and bullying behavior. Personnel are to intervene when prohibited behaviors are witnessed;
- 7.3.2.6. Check with the victim daily to ensure that there has been no incidents of harassment/intimidation/bullying or retaliation from the offender or other parties.

8. Reporting Obligations

8.1. Report to the Parent or Guardian of the Perpetrator

- 8.1.1. If after investigation, acts of harassment, intimidation and bullying by a specific student are verified, the building principal or his/her designee shall notify in writing the parent or guardian of the perpetrator of that finding. If disciplinary consequences are imposed against such student, a description of such discipline shall be included in such notification.

8.2. Reports to the victim and his/her parent of guardian

8.2.1. If after investigation, acts of bullying against a specific student are verified, the building principal or his/her designee shall notify the parent or guardian of the victim of such finding. In providing such notification, care must be taken to respect the statutory privacy rights of the perpetrator of such harassment, intimidation and bullying.

8.3. List of verified acts of harassment, intimidation or bullying

8.3.1. A requirement that the district administrators semiannually provide the president of the district board a written summary of all reported incidents and post the summary on the district Web site, if one exists. The list shall be limited to the number of verified acts of harassment, intimidation and bullying, whether in the classroom, on school property, to and from school, or at school-sponsored events.

8.3.2. This policy shall not be interpreted to prohibit a reasonable and civil exchange of opinions or debate that is protected by state or federal law such as the nondiscrimination, suspension and expulsion/due process, violent and aggressive behavior, hazing, discipline/punishment, sexual harassment, peer sexual harassment and equal educational opportunity acts.

9. Police and Child Protective Services

9.1. Allegations of criminal misconduct will be reported to law enforcement, and suspected child abuse must be reported to Child Protective Services, per required timelines. The Lawrence County DD must also investigate for the purpose of determining whether there has been a violation of Program's policy or Procedure, even if law enforcement or CPS is also investigating. All Lawrence County DD personnel must cooperate with investigations by outside agencies.

9.2. In addition to, or instead of, filing a bullying/harassment/intimidation complaint through this policy, a complainant may choose to exercise other options, including but not limited to filing a complaint with outside agencies or filing a private lawsuit. Nothing prohibits a complainant from seeking redress under any other provision of the Revised Code or common law that may apply.

10. Training

- 10.1. Orientation sessions for students shall introduce the elements of this policy and procedure. Students will be provided with age-appropriate information on the recognition and prevention of harassment, intimidation or bullying, and their rights and responsibilities under this and other district policies, procedures and rules, at student orientation sessions and on other appropriate occasions. Parents will be provided with information about this policy and procedure, as well as information about other district and school rules and disciplinary policies. This policy and procedure shall be reproduced in student, staff, volunteer and parent handbooks.
- 10.2. Information regarding the policy on harassment/intimidation/bullying behavior shall be incorporated into employee training materials and volunteers with direct contact with students. Time spent by school employees in the training, workshops or courses shall apply toward any state or district mandated continuing education requirements.
- 10.3. School personnel members are encouraged to address the issue of harassment/intimidation/bullying in other interaction with students. School personnel may find opportunities to educate students about bullying and help eliminate bullying behavior through class discussions, counseling and reinforcement of socially appropriate behavior. School personnel should intervene promptly whenever they observe student conduct that has the purpose or effect of ridiculing, humiliating or intimidating another student/school personnel, even if such conduct does not meet the formal definition of "harassment/intimidation/bullying."

Lawrence County Developmental Disabilities

Policy 3.16 – Technology First

I. Purpose

To implement the technology first rule in accordance with section 5123.025 of the Revised Code, and to assure that technology solutions are explored, documented and utilized to the greatest extent possible to support outcomes for all individuals served by the Lawrence County Developmental Disabilities (DD).

II. Policy

- A. The Lawrence County DD will develop procedures and processes to assure that technology solutions are:
 - 1. Explored and documented throughout the initial and ongoing person-centered assessment and planning process; and
 - 2. Used to the greatest extent possible to support the outcomes in an individual service plan.
 - 3. Address ability to increase capacity for use of technology solutions and outline specific steps, as applicable, to be taken including, when applicable, establishment of benchmarks for increasing the number of individuals who benefit from the use of technology solutions.
 - 4. Identify strategies for increasing the level of knowledge, skill, and comfort of staff related to assessing how technology may help meet needs or achieve outcomes and the use of technology solutions.
 - 5. Annually review and update, as applicable, its goals and objectives related to increasing the use of technology solutions by individuals served.
- B. The Lawrence County DD will actively collaborate with individuals served and their families, providers of services, the department, and community partners (e.g. local schools, mental health agencies, area agencies on aging, county departments of job and family services, public transit authorities, local vocational rehabilitation centers, and employers to expand awareness and use of technology solutions for individuals served.
- C. Each individual served by the Lawrence County DD will participate in a person-centered assessment and planning process in accordance with rule 5123-3-03 or 5123-4-02 of the Administrative Code, if applicable, which identifies the individual's unique strengths, interests, preference, and resources and explore how technology solutions might support the individual's desired outcomes.
- D. Through the person-centered planning process:

1. The individual and the individual's team will discuss any technology solutions previously or currently used by the individual and the effectiveness of the technology solution;
2. The individual and the individual's team will discuss the individual's needs, explore information regarding available technology solutions, and consider how each technology solution might:
 - (a) Enhance the individual's personal freedom;
 - (b) Increase the individual's ability to community effectively with others;
 - (c) Expand opportunities for the individual to access and pursue available activities and establish meaningful relationships with people who are important to the individual;
 - (d) Enable the individual to perform tasks that support the individual's efforts to obtain or maintain employment; or
 - (e) Help the individual increase and/or maintain independence with daily tasks and activities.
3. After discussing whether or not technology solutions may be appropriate, the individual and the individual's team:
 - (a) Will discuss how available technology solutions may advance what is important to or important for the individual;
 - (b) May make referrals for assessments by technology subject matter experts to identify technology solutions; and
 - (c) May identify additional evaluations needed to determine whether other available technology solutions meet the individual's assessed needs.
4. When available technology solutions have been determined by the individual and the individual's team to meet the individual's assessed needs, they will be included in the individual service plan.
 - (a) Technology solutions included for the duration of the individual service plan may be reviewed and modified at any time based on a request by the individual or the individual's team. Technology solutions included on a trial basis are to be reviewed by the individual and the individual's team at the conclusion of the trial period.
 - (b) When reviewing a technology solution to determine whether the technology solution is effective and should continue, the individual and the individual's team are to consider:
 - (i) The individual's experience in terms of achieving outcomes described in section III, paragraph D.2. of this policy.
 - (ii) Whether the technology solutions enhanced the individual's health or safety;

- (iii) Whether additional support is needed to facilitate use of the technology solution (e.g. scheduled battery replacements or more frequent communication with the technology solution vendor).
 - (iv) Whether the technology solutions reduced dependence on staff by increasing the individual's independence and without having the effect of isolating the individual from the individual's community or preventing the individual from interacting with people with or without disabilities; and
 - (v) Whether the individual has a desire to continue to use the technology solution.
- C. The results of the person-centered planning process, including, as applicable, the individual's desired outcomes as they relate to technology solutions and the activities that will occur to expand the individual's exploration, awareness, and use of technology solutions, will be integrated into the individual service plan. The individual service plan will be amended if the individual's service needs changed.

NONDISCRIMINATION OF INDIVIDUALS SERVED

- A. Lawrence County Developmental Disabilities shall provide benefits, services and opportunities to all individuals eligible for services equally, without regard to race, color, national origin, religion, age, sex, sexual orientation, socioeconomic status, language or disability in accordance with the determined needs of the individual.
- B. There is no distinction made in determining eligibility for, or in the manner of providing, services because of race, color, national origin, religion, age, sex, sexual orientation, socioeconomic status, language or disability.
- C. In keeping with the Board's commitment to be responsive to individual needs and preferences, within available resources, every effort to match staff with service needs and accommodate individual family requests will be made when possible.
- D. All persons and organizations having occasion to refer or recommend individuals to this agency are advised to do so without regard to the individual's race, color, national origin, religion, age, sex, sexual orientation, socioeconomic status, language or disability.
- E. Any individual served, parent, guardian, or daily representative who believes that an individual has been treated in a discriminatory manner may make a verbal or written complaint of discrimination to the Superintendent or any Director of Board program.
- F. No persons served shall be retaliated against, offered negative repercussion nor endure any barriers to services because of race, color, national origin, religion, sex, age, sexual orientation, socioeconomic status, language or disability or pursuit of due process or administrative resolution of complaints.

Revised: 8/13/19

Adopted: 2/21/06

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 4.02 - PROMOTION OF PROGRAM AND SERVICE ACCESSIBILITY

- A. It is the policy of the Lawrence County Developmental Disabilities (LCDD) to establish and maintain program, architectural/facility and employment accessibility, which will affirm and demonstrate that the facilities and programs under its jurisdiction do not discriminate against people with disabilities.
- B. The LCDD, as a recipient of federal financial assistance, is mandated to comply with a number of federal laws that prohibit discrimination in service provision and employment. The LCDD will maintain a program and facility whereby no otherwise qualified individuals with a disability shall by:
 - 1. Excluded, solely by reason of his/her disability, from the participation in services and activities;
 - 2. Denied benefits from such services and activities; or,
 - 3. Subjected to discrimination.
- C. The Board further assures that all programs under its jurisdiction shall comply with appropriate sections of the Ohio Revised Code. The LCDD and its programs are committed to protecting the human rights of its employees and service recipients, promoting fair treatment practices and insuring equal opportunity in employment throughout its facilities and those under contract to provide services.

Revised: 8/15/22

Revised: 8/13/19

Adopted: 2/21/06

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 4.03 – ELIGIBILITY DETERMINATION

I. Purpose

To provide consistent guidelines for the determination of eligibility for all Lawrence County DD programs and services. Students who are referred for educational services must have Lawrence County DD eligibility before being placed at Open Door School, and as required to maintain eligibility.

II. Policy

In order to receive services provided by Lawrence County DD or its contract agencies, an individual must be a resident of Lawrence County and have a developmental disability. Developmental disability means a severe, chronic disability that is characterized by all of the following:

- A. It is attributable to a mental or physical impairment or a combination of mental and physical impairments, other than a mental or physical impairment solely caused by mental illness as defined in division (A) of Section 5122.01 of the Revised Code;
- B. It is manifested before age twenty-two;
- C. It is likely to continue indefinitely;
- D. It results in one of the following:
 - 1. In the case of a person under age three, at least one developmental delay or an established risk;
 - 2. In the case of a person at least 3 but under age 6, at least two developmental delays or an established risk;
 - 3. In the case of a person at least age six or older, a substantial functional limitation in at least three of the following areas of major life activity, as appropriate for his age: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and, if the person is at least age sixteen, capacity for economic self-sufficiency.
- E. It causes the person to need a combination and sequence of special, interdisciplinary, or other type of care, treatment, or provision of services for an extended period of time that is individually planned and coordinated for the person.

III. Eligibility will be determined according to rules established by the Ohio Department of Developmental Disabilities.

IV. Each Board program shall maintain procedures for the enrollment of eligible individuals.

V. The Board shall refer persons not eligible for programs and services offered by the Board to other entities of state and local governments or appropriate private entities for services.

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

- VI. All individuals shall have the right to the Board's Administrative Resolution of Complaints/Due Process Policy and Procedures.

Revised: 2/8/22
Revised: 8/13/19
Adopted: 2/21/06

THE RIGHTS OF INDIVIDUALS WITH A DEVELOPMENTAL DISABILITY

- A. The Lawrence County Developmental Disabilities is dedicated to safe guarding the rights of all individuals receiving services as specified in the Section 5123.62 of the Ohio Revised Code.
- B. The rights of persons with a developmental disability include, but are not limited to, the following:
 - 1. The right to be treated at all times with courtesy and respect and with full recognition of their dignity and individuality;
 - 2. The right to an appropriate, safe, and sanitary living environment that complies with local, state, and federal standards and recognizes the persons' need for privacy with independence;
 - 3. The right to food adequate to meet accepted standard of nutrition;
 - 4. The right to practice the religion of their choice or to abstain from the practice of religion.
 - 5. The right of timely access to appropriate medical or dental treatment;
 - 6. The right to access to necessary ancillary services including, but not limited to, occupational therapy, physical therapy, speech therapy, and behavior modification and other psychological services;
 - 7. The right to receive appropriate care and treatment in the least intrusive manner;
 - 8. The right to privacy, including both periods of privacy and places of privacy;
 - 9. The right to communicate freely with persons of their choice in any reasonable manner they choose;
 - 10. The right to ownership and use of personal possessions so as to maintain individuality and personal dignity;
 - 11. The right to social interaction with members of either sex;
 - 12. The right to access opportunities that enable individuals to develop their full human potential;
 - 13. The right to pursue vocational opportunities that will promote and enhance economic independence;
 - 14. The right to be treated equally as citizens under the law;
 - 15. The right to be free from emotional, psychological and physical abuse;
 - 16. The right to participate in appropriate programs of education, training, social development, and habilitation and in programs of reasonable recreation;
 - 17. The right to participate in decisions that affect their lives;
 - 18. The right to select a parent or advocate to act on their behalf;
 - 19. The right to manage their personal financial affairs, based on individual ability to do so;
 - 20. The right to confidential treatment of all information in their personal and medical records; except to the extent that disclosure or release of records is permitted under sections 5123.89 and 5126.044 of the Revised Code

21. The right to voice grievances and recommend changes in policies and services without restraint, interference, coercion, discrimination, or reprisal;
22. The right to be free from unnecessary chemical or physical restraints;
23. The right to participate in the political process;
24. The right to refuse to participate in medical, psychological, or other research or experiments.

Revised: 8/13/19

Adopted: 2/21/06

INDIVIDUAL SERVICE PLAN

The Lawrence County Developmental Disabilities shall develop procedures that ensure, to the extent desired by the individual served and his/her family or guardian, that one process is used to develop the Individual Service Plan (ISP), even when the individual is receiving services and supports from more than one county board program component.

Revised: 8/13/19

Reviewed: 2/21/06

Adopted: 3/29/04

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 4.06 - HOME AND COMMUNITY-BASED SERVICES WAIVER (HCBS) FREE CHOICE OF PROVIDER

I. PURPOSE

The Lawrence County Board of Developmental Disabilities shall follow the Free Choice of Provider process for ensuring individuals are notified of their right to choose from any qualified and willing provider in accordance with rule 5123-9-11.

II. POLICY

- A. Lawrence County DD shall follow the free choice of Provider choice process in accordance with OAC 5123-9-11 for each service specified in an individual's Individual Service Plan (ISP), at the time of an individual's enrollment in a home and community-based services program, annually at the time of redetermination, and at any other time the individual/guardian expresses an interest in or makes a request to choose a new, different, or additional provider.
- B. An individual and/or guardian, if applicable, shall be responsible for making all decisions regarding free choice of providers. An individual and/or guardian, if applicable, may designate another person, including a member of the individual's family, to participate in the process of making decisions regarding free choice of providers.
- C. The Service and Support Administrator (SSA) or the SSA Assistant shall assist an individual enrolled in a HCBS waiver with one or more of the following, as requested by the individual:
 - 1. Accessing the Ohio Department of Developmental Disabilities' (DODD) website to conduct a search for qualified and willing providers;
 - 2. Providing the individual with DODD's guide to interviewing prospective providers;
 - 3. Sharing objective information with the individual about providers that includes reports or provider compliance reviews conducted in accordance with ORC 5123.162 or 5123.19, approved plans of correction submitted by providers in response to compliance reviews, number of individuals currently served, and any information about services offered by the provider to meet the unique needs of a specific group of individuals such as aging adults, children with autism, or individuals with intense medical or behavioral needs.
 - 4. Utilizing the statewide, uniform format to create a profile that shall include the of services and support the individual requires, hours of services and support required, the individual's essential service preferences, the funding source of services and any other information the individual chooses to share with prospective providers;
 - 5. Making available to all qualified providers in the county that have expressed an interest in serving additional individual, the individual-specific profile created in accordance with section (C)(4) of this policy to identify willing providers of the service.
 - 6. Contacting providers on the individual's behalf;

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

7. Developing provider interview questions that reflect the characteristics of the individual's preferred provider; and
 8. Scheduling and participating as needed in interviews of prospective providers. The SSA or SSA Assistant may participate in this interview as directed by the individual.
- D. The SSA shall provide a written notification of free choice of providers, assistance with the provider selection process, and procedural safeguards to each individual, guardian, if applicable, and any persons designated by the individual in a form and manner that the individual can understand. The notification shall be made at the time of enrollment in a HCBS waiver and at least annually thereafter. The SSA shall maintain documentation of the notification. The notification shall specify that:
1. The individual may choose from all qualified and willing providers from among all those available statewide and not limited to those who provide services currently in a given county.
 2. The individual may choose agency providers, independent provider, or a combination of agency providers and independent providers;
 3. The individual may choose to receive services from a different provider at any time;
 4. An individual choosing to receive homemaker/personal care (HPC) in a licensed residential facility is choosing both the place of residence and the HPC provider, but maintains free choice of providers for all other HCBS waiver services and the right to move to another setting at any time if a new HPC provider is desired;
 5. The SSA or SSA Assistant shall assist the individual with the provider selection process if the individual requests assistance; and;
 6. When a provider offers more than one service, the individual may choose to receive only one of the offered services from that provider.
- E. The SSA or SSA Assistant shall document that each individual has been offered free choice among all qualified and willing providers of HCBS waiver services, including the alternative HCBS waiver services that were considered by each individual and ensure that each ISP reflects the setting options chosen by the individual.
- F. A procedure shall be developed to specify the provider choice process and to ensure that HCBS waiver services begin in accordance with the date established in the ISP. The procedure shall include a requirement of monitoring the service commencement process and implement corrective measures if services do not begin as indicated.
- G. If the Board receives a complaint from an individual regarding the free choice of provider process, the Board shall respond to the individual within 30 days and provide DODD with a copy of the individual's complaint and the Board's response.
- H. The Board shall notify DODD if the Board becomes aware of a provider conditioning willingness to provide a HCBS waiver service to an individual based on being selected by he individual to provide another service.
- I. Any recipient or applicant for HCBS waiver services may utilize the due process and appeal rights set forth in ORC 5101.35 and OAC 5101:6 for any purpose authorized by that statute and the rules implementing the statute, including being denied the choice of a provider who is qualified and willing to provide HCBS waiver services. The process set forth in ORC 5101.35 is available only to applicants,

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

recipients, and their lawfully authorized representatives. The SSA shall notify the individual and guardian, if applicable, of these rights in writing and in a manner that individual can understand.

- J. The Board shall immediately implement any final state hearing decision or administrative appeal decision relative to free choice of providers for HCBS wavier services issued by the Ohio Department of Medicaid, unless a court of competent jurisdiction modifies such a decision as the result of an appeal by the Medicaid applicant or recipient.

Revised: 2/8/22
Revised: 8/13/19
Revised: 10/20/15
Revised: 9/21/10
Adopted: 2/21/06

ADMINISTRATIVE RESOLUTION OF COMPLAINTS DUE PROCESS

- A. The Lawrence County Developmental Disabilities shall protect the right of individuals receiving, or applying to receive board services. Individuals, parents, guardians, and/or caregivers shall be given annual notice of this policy. This appeal policy for Board enrollees is in addition to any other rights which an individual, parent of a minor, guardian, or agency may have pursuant to Ohio Revised Code or any other applicable state or federal law.
- B. Any person, other than an employee of the Board, may file a complaint using the administrative resolution process established under OAC 5123:2-1-12, and shall use this process prior to commencing a civil action regarding the complaint.
- C. For an individual placed by the local education agency (LEA) into the Board program, the *Operating Standards for Ohio's Schools Serving Children with Disabilities*, as promulgated by the State Board of Education Chapter 3301-51 of the Ohio Revised Code, shall be followed, as well as the Ohio Department of Education model procedures.
- D. Individuals, parents of a minor, guardians, and residential and support providers shall be informed annually of the right to due process and Administrative Resolution of Complaints in accordance with Chapter 5126 of the Ohio Revised Code and OAC 5123:2-1-12. This applies to services provided directly by the Board, as well as services under contracts provided by other agencies under contract with the Board.
- E. Areas subject to due process include, but are not necessarily limited to, eligibility determination, arranging appropriate services for eligible individuals, or any denial, reduction, or termination of services by the Board.
- F. Only issues under the control of the Board are subject to due process. Any appeal filed with the Board will not cancel any other rights to services. If an individual, parent of a minor, or guardian is appealing a termination or reduction of services or change in services, current services shall continue to be provided pending final resolution.
- G. An individual who wishes to appeal a decision may be given assistance by an advocate who may speak on behalf of the individual at the individual's request.
- H. The Board shall inform the individual served, parents of a minor, or guardian that a representative of the Board is available to assist the individual with the appeal process.
- I. The provisions of this policy shall not apply to an individual applying for or enrolled in services provided pursuant to the Medicaid TCM program or the Medicaid Home and Community-Based Services (HCBS) Waiver. All such appeals of decisions of the Board shall be made to the Ohio Department of Job and Family Services (ODJFS) in accordance

with applicable rules for appeals promulgated by ODJFS under Chapters 5101:6-1 to 5101:6-9 of the Administrative Code. Such individuals may appeal other decisions of the Board related to services or administrative practices of the Board other than TCM or HCBS waiver services, using the applicable process under this policy. Concurrent to any such appeal to ODJFS, the individual and the Board may attempt to informally resolve issues related to HCBS waiver TCM services through the informal grievance procedure.

- J. Individuals receiving services and supports through the Medicaid TCM program and the Home and Community-Based Services Waiver program will be informed of due process rights at the time of application for services, annually, and when it is proposed that services be denied, reduced or terminated.
- K. The provisions of this policy shall not apply to complaints regarding the performance of delegated nursing tasks at the Board. The procedures outlined in Rules 4723-21-28 and 5123:2-1-07 of the Administrative Code shall apply.
- L. The Board and Department shall at all times maintain confidentiality concerning the identities of individuals, complainants, witnesses, and other involved parties who provide information unless the individual or his/her representative, in writing, authorized the release of information.
- M. Timelines may be extended if mutually agreeable to all involved parties.
- N. The toll-free number for the Ohio Department of DD and Ohio Legal Rights Service shall be posted in a visible place at all locations in which the Board provides or contracts to provide services. The toll-free number for the Ohio Department of Education shall be posted at the Early Childhood Center and the Open Door School.
- O. Procedures for the administrative resolution of complaints, Medicaid due process, and the informal grievance process shall be developed.

Revised: 8/13/19

Adopted: 2/21/06

CONFIDENTIALITY OF INFORMATION

- A. The Lawrence County Developmental Disabilities shall ensure and safeguard the confidentiality of individuals served, pursuant to applicable state and federal regulations, Department of Education Model Procedures.
- B. The Board shall maintain full compliance with Family Education Rights & Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA).
- C. All information contained in an individual's record, including information contained in an automated data bank, shall be considered confidential. The content of these records is never the subject for discussion, except as an official member of an individual's planning team, or as required for treatment, payment, and health care operations.
- D. Written permission from the individual, parent of a minor, or guardian shall be obtained prior to releasing information to persons not otherwise authorized to receive such information. The permission shall specify the person or organization to whom the information shall be released and the time period during which the permission is valid.
- E. Each program component shall have a designated person responsible for ensuring the safekeeping of records and securing them against loss or use by unauthorized persons.
- F. Individual records shall be accessible to DODD personnel authorized by the Director of the Department, the individual, parent of a minor, or guardian.
- G. Individual records shall be kept on file in a secure location to assure the permanence of the records for the time during which services are provided and for transmittal to an alternative program if an alternative placement occurs.
- H. An individual, parent of a minor, or guardian is entitled to request confidential communications, including for example, not sending information to their home address or telephoning their home number. These requests will be honored to the extent that they can be reasonably accommodated within the Board's administrative system.
- I. The provisions of this policy shall apply to all Board member, employees, volunteers/interns, and contract service providers of all divisions of the Board.
- J. Confidentiality procedures shall be developed. For individuals placed by the LEA, confidentiality procedures shall be developed in accordance with the *Operating Standards for Ohio's Educational Agencies Serving Children with Disabilities* (OAC 3301-51).
- K. Individuals, parent of a minor, or guardian shall be given annual notice of this policy.

Revised: 8/13/19

Adopted: 2/21/06

POLICY 4.09 – WAITING LIST

- I. This policy shall affirm the Board’s commitment to use resources efficiently and effectively to provide services in a fair and consistent manner with applicable federal and state laws. Services shall be provided in the least restrictive setting appropriate to each individual’s needs.
- II. The Board shall determine the capacity of its resources to serve eligible persons as defined in the eligibility determination policy within its facilities, programs, services, and supports including contracts or arrangements with other affiliated public and private entities. Annually the Board shall identify how many individuals the Board plans to enroll in each type of locally-funded home and community-based services waiver. The Board shall make this information available to any interested person upon request.
- III. When resources are not sufficient to meet the needs of eligible persons within a particular category of service, the Board shall establish and maintain a waiting list. Individuals may appeal decisions regarding placement on a waiting list as defined in the Board’s Administrative Resolution of Complaint Due Process Policy. A separate waiting list shall be maintained for each of the following categories or subcategories of services, programs or supports provided or arranged by the Board:
 - A. School Age Education Services
 - B. Home & Community-Based Services Waiver (HCBS, including: I.O., Level One, SELF)
 - C. Family Support Services
 - D. Other services as appropriate to meet individualized needs
- IV. Home and community-based services
 - A. An individual/guardian who thinks the individual has an immediate or current need may contact the Board’s Service and Support Administration Department to request a waiting list assessment.
 - B. The individual shall be placed on the waiting list for home and community-based services when, based on the waiting list assessment tool, the individual:
 1. Has been determined to have a condition that is:
 - (a). Attributable to a mental or physical impairment or combination of mental and physical impairments, other than an impairment caused solely by mental illness;
 - (b). Manifested before the individual is age twenty-two; and
 - (c). Likely to continue indefinitely; and
 2. Has a current need which cannot be met by community-based alternative services (including a situation in which an individual has a current need despite the individual’s enrollment in a home and community-based services waiver)
 - C. An Individual shall not be placed on the waiting list for home and community-based services when the individual:
 1. Is a child who is subject to a determination under section 121.38 of the Revised Code and requires home and community-based services; or
 2. Has an immediate need, in which case a Service and Support Administrator (SSA) shall take action necessary to ensure the immediate need is met.

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

- D. When an individual is placed on the waiting list for home and community-based services, the following shall occur:
 - 1. The status date or individual's date of request (for those on the transitional list) shall be recorded in DODD's web-based waiting list management system
 - 2. The individual/guardian shall be notified of placement on the waiting list for home and community based services
 - 3. The individual/guardian shall be provided the contact information of an SSA who can assist in identifying and accessing alternative services that address, to the extent possible, the individual's needs.
- E. Annually the SSA shall review the waiting list assessment tool and service needs of each individual who is on the waiting list for home and community-based services with the individual/guardian and will assist them in identifying and accessing alternative services.
- F. Upon the determination that an individual's status has changed with regard to having an immediate need and/or having a current need or an individual's status date has changed, the individual's record in DODD's web-based waiting list management system shall be updated.
- G. Individuals shall be selected for enrollment in locally-funded home and community-based services waivers in accordance with OAC 5123-9-04 (E).
- H. Individuals shall be selected for enrollment in state-funded home and community-based services waiver in accordance with OAC 5123-9-04 (F).
- I. Individuals shall be removed from the waiting list for home and community-based services in accordance with OAC 5123-9-04 (H).
- J. An SSA shall administer the waiting list assessment tool to each individual on the transitional list of individual's waiting for and community-based services within the timeframe specified by DODD.
- K. The SSA Department shall notify DODD of the determination of the waiting list assessment tool.
- L. Due Process shall be afforded to an individual related to:
 - 1. The approval, denial, withholding, reduction, suspension, or termination of a service funded by the state Medicaid program;
 - 2. Placement on, denial of placement on, or removal from the waiting list for home and community-based services or the transitional list of individuals waiting for home and community-based services; or
 - 3. A dispute regarding an individual's date of request or status date.
- M. The Board shall refer persons not eligible for programs and services offered by the Board to other entities of state and local government or appropriate private entities for services.

REVISED: 2/8/22

REVISED: 9/18

REVISED: 12/16

REVISED: 12/12

REVIEWED: 2/21/06

ADOPTED: 3/16/04

SELF DETERMINATION

- A. In accordance with the principles of self-determination, the Lawrence County Developmental Disabilities believes individuals with developmental disabilities should be afforded the right to make decisions and choices affecting their daily lives. The ultimate goal of the Board is to support all eligible individuals in living, working and socializing in the community in a manner commensurate with all other citizens of Lawrence County.
- B. Adhering to the self-determination principles of freedom, authority, support and responsibility, the Board supports the premise that support and quality will be improved if an individual consumer has control over the services to be provided and coordinates those services.
- C. In permitting an individual to exercise the freedom and options in choosing their services and providers, there are certain provisions the Board believes are critical to comply with federal, state and local statute and rule. These provisions include but are not limited to:
1. Defining use of public dollars. The Board shall not spend public dollars on something that is:
 - Not in the Individual Service Plan
 - Not reasonable and customary for the general population
 - Not therapeutic
 - A health and safety issue
 - Not allowable through law or audit
 - In excess of the identified budget
 2. Emergencies are defined as a situation that could be a health or safety issue that is not in the Individual Service Plan. Emergencies exceeding the planning amount shall be approved by the Superintendent.
 3. Individuals involved in self-determination must have supports provided through service and support administration as defined in ORC 5126.15.
 4. In the transfer of power from the system to the individual, the Board has the authority to intercede on behalf of the individual at any time should the individual be at risk for health and safety or subject to an event or situation that meets the definition of a Major Unusual Incident.

Revised: 8/13/19

Approved: 11/16/10

HEALTH AND SAFETY

A. Introduction

This policy addresses the requirements of sections of the Ohio Revised Code and the Ohio Administrative Code relating to safety and health in schools and county boards of DD facilities, including the fire code. Safety regarding Lawrence County Developmental Disabilities (LCDD) sponsored transportation services and medication administration will be addressed in separate policies.

B. Written Plans

In accordance with OAC 5123:2-1-02, the LCDD shall, by adopting this policy, mandate the following:

1. A procedure for giving first aid and emergency treatment;
2. A procedure for securing emergency squad or ambulance services, or the services of an individual's personal physician in a serious medical emergency;
3. A plan for, and the provision of, suitable first aid facilities, equipment and supplies and personal protective equipment and supplies in places readily accessible in an emergency;
4. A procedure for the management of communicable diseases, handling of on-site illness, and returning to work/services after an illness, injury or other health condition (see also: Policy on Communicable Diseases, Blood-borne Pathogens and Infection Exposure Control);
5. The posting of emergency numbers by each agency owned, stationary telephone; and
6. The creation and maintenance of building emergency plans that include procedures for fire, tornado, bomb threat, power failure, natural disaster, medical emergency, missing service recipient, intruders and other emergencies requiring rapid dismissal, evacuation, taking shelter, lockdown, and reunification, etc.
7. That the written procedures listed above are to be developed and updated by staff or consultants designated by the Superintendent and communicated to employees, service recipients, families,

guardians, select first responders and other service providers periodically. Safety and wellness procedures shall be available in each facility upon request. Security-related information is exempt from this provision because it is not a public record.

8. Procedures regarding the safe removal and abatement of materials containing asbestos that may be encountered in the facilities of the Board.
9. Procedures regarding the use of responsible pest management methods inside and outside of the Board's facilities, and including chemical weed control.

C. School Emergency Management Plans

1. In accordance with ORC 3313.539, the superintendent and his/her administrative staff are charged with the responsibility of developing and adopting a comprehensive emergency management plan. This plan shall include:
 - a. A protocol for addressing serious threats to the safety of, students, employees and property;
 - b. A protocol for responding to any emergency events that occur and compromise the safety of students, employees and property. This protocol shall include, but not be limited to, all of the following:
 - i. A floor plan that is unique to each floor of the building;
 - ii. A site plan that includes all building property and surrounding property;
 - iii. An emergency contact information sheet.
 - iv. A protocol for notifying appropriate law enforcement and/or other emergency response personnel
 - v. A protocol for notifying students' parents/guardians/caregivers
2. The Director of School Programs will be responsible for reviewing, updating, and distributing copies of the emergency management plan in accordance with ORC Section 3313.53.

3. Copies of the emergency management plan are exempt from public disclosure or release in accordance with ORC Sections 149.43, 149.33 and 5502.03.
4. These plans shall be on file with the superintendent and shall address the special needs of individuals.
5. Evacuation plans for fire and tornado drills and other emergencies shall be posted in each room and area of each facility.

D. Additional Measures

Facilities and Equipment

1. The design and maintenance of all county board facilities and equipment whether owned, rented, leased or donated, shall take into consideration the needs of individuals to be served and shall be in conformance with all applicable laws, including the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973 now and as amended. Where architectural barriers are present, the Board shall pursue a plan for the removal of these barriers.
2. All doors and exits to be used for emergency evacuation of all facilities will be set to allow egress during the times people are present in such facilities.
3. All hallways, entrances, ramps, and corridors shall be kept clear and unobstructed at all times.
4. Fire extinguishers, fire gongs, and alarms shall be properly located, identified and kept in good working order.
5. effectively separated from all rooms and work areas in such a way as to minimize and inhibit the spread of fire
6. Exits shall be plainly marked.
7. All facilities shall have not less than two means of exit, exclusive of ladders and elevators.

E. Inspections

1. Each newly acquired program facility, whether owned or leased by the Board, shall be inspected by the State building inspector or his/her designated representative to ensure compliance with local and State safety regulations and the Ohio Building Code. Inspection reports shall be kept on file in the appropriate administrative office of Board.
2. Each program facility owned, leased or operated by the Board shall be inspected at least annually by the local fire marshal or designee to ensure compliance with fire safety practices.
3. Each facility will be inspected by the Health Department. Food preparation areas will be inspected as required by law.
- 4, Air and water quality will be tested periodically

- F. Regarding the Occupational Safety and Health Act of 1970 and the Public Employment Risk Reduction Act codified under O.R.C. 4167, the LCDD takes the following stand.

Work safety and health are a primary concern of the Board. The safe and healthful performance of all work assignments is the responsibility of both supervisory and non-supervisory personnel. It is the employee's responsibility to ensure that all equipment is used safely and all safety procedures and/or practices are utilized and/or observed. Employees shall also abide by all public employment risk reduction standards set forth in Board policy and any other safety procedure promulgated by the administration of this agency.

1. All employees are charged with the responsibility of reporting the existence of any hazardous condition or practice in the workplace to their supervisor.
2. The Superintendent, or designee, will advise employees through correspondence, postings, meetings and material safety data sheets of any hazardous chemicals or materials that employees may use or contact in the performance of their jobs. Further, the Superintendent will cause educational dissemination of materials to employees to update and advise them of changes. (Reference: Policy regarding hazard communication)

- G. Training

1. The Director of School Programs shall prepare and conduct at least one annual emergency management test in accordance with OAC 3301-5-01.
2. In all programs employees will be designated who are responsible for instructing and training service recipients and staff so that should an emergency occur, everyone may leave the facilities in the shortest possible time without confusion.

This instruction and training of the procedures in the emergency plans will include fire drills, tornado drills and/or rapid dismissals at least once each month while programs are in session.

3. Other drills, training exercises and procedure reviews will be carried out in compliance with ORC 3737.73 regarding pupil instruction and best practices.
4. Training in first aid, cardiopulmonary resuscitation and fire safety will be provided to employees involved in direct care positions in accordance with OAC 5123:2-2-01.
5. All County Board employees will receive annual training in universal precautions including handwashing, disposal of bodily waste, and the use of personal protective equipment (PPE).
6. Each emergency in all programs drills/tests will be recorded and a written analysis of the conduct and effectiveness of each shall be prepared by a designated staff member and submitted to the superintendent or designee. Actual emergencies and incidents that impact services will also be recorded and analyzed.

H. School Standards

The health and safety of students who attend Open Door School will be safeguarded in these additional ways:

1. The LCDD has zero tolerance for violent, disruptive or inappropriate behavior that cannot be contributed to a student's disability.
2. The LCDD has zero tolerance for harassment, intimidation or bullying of any student on school properly, on a school bus, or at a school-sponsored event. (Ref.: ORC 3313.666)

3. All school staff will receive training in cardiopulmonary resuscitation (CPR) and automated external defibrillator (AED), and repeat it at least once every five years.
(Reference: ORC 3313.6021 and 3313.6023)
4. Full compliance with ORC 3313.65 and 3313.671 regarding student immunizations and student immunization records.
5. Providing or contracting for vision and hearing screenings, providing referrals and follow-up, except as exempted under ORC 3313.69.
6. Employ or contract with licensed health care professional. (ORC 3313.713)
7. Ensure that each student enrolled in the school who has diabetes receives appropriate and needed diabetes care in accordance with the student's physician's signed order.
8. Require and retain valid emergency medical authorization on each student in accordance with ORC 3313.712.
 - a. Provide and permit trained staff to administer drugs to students as prescribed by a subscribing medical practitioner per ORC 3313.713.
 - b. Require the creation and renewal of a food allergy protection procedure per ORC 3313.719.
 - c. Ensure that at least one employee trained in methods to prevent choking and who has demonstrated an ability to perform the Heimlich maneuver be present while students are being served food per ORC 3313.815.
 - d. Ensure adequate supervision of grounds and play areas and other facilities when being used by students.

I. Emergency Situations

1. Emergency medical authorization and information will be kept as current as possible on all service recipients in a place that is secure but accessible in an emergency. Staff will be asked to provide emergency contact information for themselves in or near their workspace.
2. All accidents, on-set of illness and incidents involving service recipients are to be reported to parent/guardian, residential provider or

other caregiver as appropriate, as soon as deemed necessary. In the event of a serious accident, notification should be immediate. In extreme emergencies immediate arrangements will be made to transfer a service recipient for medical care, whether or not a parent/guardian/provider can be contacted.

3. An UI/MUI report should be completed on any accident or incident involving a service recipient in accordance with the UI/MUI procedures.
4. Accidents/injuries/illnesses of staff members should be reported to administration in accordance with the written accident/injury procedure. The procedure will include a process for review of these reports for ways to prevent future accident/injuries.
5. Emergency first aid will be provided by the staff nurse or other trained personnel in accordance with current best practices as determined by staff nurses.
6. Only emergency first aid will be rendered. No program employee shall prescribe medicine for accidents, injuries or illnesses.

Adopted: 8/13/19

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 5.02 - ADDRESSING MAJOR UNUSUAL INCIDENTS AND UNUSUAL INCIDENTS TO ENSURE HEALTH, WELFARE, AND CONTINUOUS QUALITY IMPROVEMENT

I. Policy Statement

The Lawrence County DD is committed to its responsibility to guard the health and safety of those we serve, and to provide education and resources to the community to promote a high quality of life for individuals in Lawrence County with developmental disabilities.

II. Purpose for Policy

- A. Ensure the health and welfare of individuals served;
- B. Assist in managing incidents and reducing the risk of future incidents; and
- C. Ensure continual improvement in the quality of services to individuals.

III. Employment of Investigative Agent

The County Board is in a contractual agreement with the Southern Ohio Council of Governments (SOCOG) for the provision of MUI investigative and coordination services. SOCOG employs an Ohio DODD certified, full-time, MUI Coordinator/Investigative Agent who is assigned to provide services in Lawrence County.

IV. Reporting

Any person providing services to an individual including county board staff, and providers of services, are required to report alleged, suspected, or actual occurrences of abuse or neglect to the statutory responsible agent.

V. Investigations

- A. Major Unusual Incidents (MUIs) as used in this policy are defined in OAC 5123-17-02. The County Board will adhere to the procedures for the reporting and investigating MUIs in this same Rule.
- B. An administrative investigation is the gathering and analysis of information related to a major unusual incident so that appropriate action can be taken to address any harm or risk of harm and prevent recurrence. There are three administrative investigation procedures (category A, category B, and category C) that correspond to the three categories of major unusual incidents.

VI. Prevention, Review and Closure of MUIs

- A. The County Board shall implement written procedures for the reporting and interval review of all MUIs and shall be responsible for taking all reasonable steps necessary to prevent the reoccurrence of MUIs.
- B. The individual's team, including the IA/MUI Coordinator, SSA, and provider when applicable, shall collaborate on the development of preventive measures to address the causes and contributing factors to the incident. The team members shall jointly determine what constitutes reasonable steps necessary to prevent the recurrence of MUIs. If there is no service and support administrator, individual team, or provided involved with the individuals, the County Board designee shall ensure that preventive measures as are reasonably possible are fully implemented.

VII. Analysis of MUI Trends and Patterns

- A. The County Board and agency providers are required to analyze MUIs to identify trends and patterns annually by January 31 in compliance with requirements of OAC 5123-17-02 (L) (1) (a-j).
- B. The County Board shall conduct the analysis and follow up for all entities operated by the County Board and any other entity as required by rule. The County Board shall send its analysis and follow up actions to the Department by February 28 for the annual review.
- C. Each agency provider is required by Rule to send its analysis and follow-up actions to the County Board for all programs operated in Lawrence County by February 28 for the annual review. The County Board shall keep the analysis and follow-up actions on file and make them available to the Department upon request.
- D. The County Board and Department shall review the analysis to ensure that all issues have been reasonably addressed to prevent reoccurrence.
- E. The County Board shall ensure that trends and patterns of MUIs are included and addressed in the individual's service plan using a person-centered approach.
- F. The County Board, or as applicable, each council of governments to which the county board belongs, shall have a Committee that reviews trends and patterns of MUIs. The Committee shall be made up of a reasonable representation of the county board(s), provider agencies, families, and other stakeholders deemed appropriate by the Committee.
- G. The role of the Committee shall be to review and share the county or council of governments aggregate data of all MUIs that occurred in the county over the previous year prepared by the County Board or council of governments to identify trends, patterns, or areas for improving the quality of life for individuals supported in the county or counties. This meeting will take place in March with the results being kept on file and made available to the Department upon request.

VIII. UI Requirements

- A. Unusual incidents shall be reported and investigated by the provider.
- B. Each agency provider and the County Board as a provider are required to develop and implement a written policy and procedure that:

1. Identifies what is to be reported as a UI, which shall include UIs as defined by OAC 5123-17-02;
 2. Requires anyone who becomes aware of a UI to report it to the person designated by the provider who can initiate proper action. This report must be made within 24 hours after the occurrence of the incident; and
 3. Requires appropriate actions be taken to protect the health and safety of any at-risk individuals.
- C. The agency provider and the County Board as a provider shall ensure that all staff are trained and knowledgeable regarding the policy and procedure.
- D. Independent providers shall complete a UI report, notify the individual's guardian or other person whom the individual has identified as applicable, and forward the UI to the County Board Service and Support Administrator (SSA) – if applicable, and the County Board IA on the first working day following the day the UI is discovered.
- E. The County Board as a provider and each agency provider and independent provider shall review their own UIs as necessary, not no less than monthly, to ensure appropriate preventative measures have been implemented and trends and patterns identified and addressed as appropriate. Individual planning teams shall ensure that any risks identified as addressed in the ISP using the person-centered planning approach.
- F. The UI reports, investigation association with the UI, documentation of identified trends and patterns, and corrective action shall be made available to the County Board and Department upon request.

IX. Access to Records

- A. Reports made under Section 5123.61 of the Ohio Revised Code and this policy are not public records as defined in Section 149.43 of the Ohio Revised Code. Records may be provided to parties authorized to receive them in accordance with Sections 5123.613 and 5126.044 of the Ohio Revised Code, to any governmental entity authorized to investigate the circumstances of the allege abuse or neglect, misappropriation, or exploitation and to any party to the extent that release of a record is necessary for the health or safety of an individual.
- B. The County Board shall not review, copy, or include in any report required by this policy personnel records, or any employee documents that are confidential under state or federal statutes or rules, including medical and insurance records, workers' compensation records, employment eligibility verification (I-9) forms, and social security numbers.
- C. The County Board may review, but not copy, personnel records that include confidential information about an employee which may include, but is not limited to, payroll records, performance evaluations, disciplinary records, correspondence to employees regarding status of employment, and criminal records checks. The county Board may include in reports required by this policy information about the results of the review of personnel records specified in this paragraph.
- D. The County Board may review and copy personnel records prepared in connection with the provider's daily operations, such as training records, timesheets, and work schedules.

- E. Upon the Department's request, the provider shall submit to the Department copies of personnel records that are not confidential.
 - F. The provider may redact any confidential information contained in a record as identified in Paragraph B above before the copies are provided to the County Board or Department.
 - G. Any party entitled to receive a report required by this policy may waive receipt of the report. Any waiver of receipt of a report shall be made in writing.
- X. UI Oversight
- A. The County Board IA shall review, on a least a quarterly basis, a representative sample of providers unusual incident logs, including logs where the County Board is a provider to ensure that major unusual incidents have been reported, preventative measures implemented and that trends and patterns have been identified and addressed in accordance with OAC 5123-17-02.
 - B. When the County Board is a provider, the County Board shall submit a representative sample of its UI logs to the Department on a monthly basis so that the Department may ensure that major unusual incidents have been reported, preventative measures implemented and that trends and patterns have been identified and addressed in accordance with OAC 5123-17-02.
- XI. Training Requirements
- A. Agency providers and the County Board must ensure that staff employed in direct service positions are trained on the requirements of this rule prior to direct contact with any individual. Training thereafter on the requirements of OAC 5123-17-02 shall be conducted annually and include a review of health and welfare alerts issued by the department in the past year.
 - B. For non-direct services staff working for agencies, or the County Board, training on OAC 5123-17-02 must occur within 90 calendar days of the date of hire. Training thereafter on the requirements of OAC 5123-17-02 shall be conducted annually and include a review of health and welfare alerts issued by the department in the past year.
 - C. Independent providers are required to be trained on the requirements of OAC 5123-17-02 prior to applying for initial certification and must receive annual training on this rule including a review of health and welfare alerts issues by the department in the past year.

Revised: 12/13/22

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Rule 5123-17-02 | Addressing major unusual incidents and unusual incidents to ensure health, welfare, and continuous quality improvement.

Ohio Administrative Code / 5123 /

Chapter 5123-17 | Requirements for Addressing Major Unusual Incidents and Unusual Incidents; Abuser Registry

Effective: November 19, 2020 Promulgated Under: 119.03

(A) Purpose

This rule establishes the requirements for addressing major unusual incidents and unusual incidents and implements a continuous quality improvement process to prevent or reduce the risk of harm to individuals.

(B) Scope

This rule applies to county boards, developmental centers, and providers of services to individuals with developmental disabilities.

(C) Definitions

For the purposes of this rule, the following definitions shall apply:

(1) "Administrative investigation" means the gathering and analysis of information related to a major unusual incident so that appropriate action can be taken to address any harm or risk of harm and prevent recurrence. There are three administrative investigation procedures (category A, category B, and category C) that correspond to the three categories of major unusual incidents.

(2) "Agency provider" means a provider, certified or licensed by the department that employs staff to deliver services to individuals and who may subcontract the delivery of

Top

(9) "Incident report" means documentation that contains details about a major unusual incident or an unusual incident and shall include, but is not limited to:

(a) Individual's name;

(b) Individual's address;

(c) Date of incident;

(d) Location of incident;

(e) Description of incident;

(f) Type and location of injuries;

(g) Immediate actions taken to ensure health and welfare of individual involved and any at-risk individuals;

(h) Name of primary person involved and his or her relationship to the individual;

(i) Names of witnesses;

(j) Statements completed by persons who witnessed or have personal knowledge of the incident;

(k) Notifications with name, title, and time and date of notice;

(l) Further medical follow-up; and

(m) Name and signature of person completing the incident report.

(10) "Incident tracking system" means the department's web-based system for reporting major unusual incidents.

Top

(iii) Failure to report. "Failure to report" means that a person, who is required to report pursuant to section 5123.61 of the Revised Code, has reason to believe that an individual has suffered or faces a substantial risk of suffering any wound, injury, disability, or condition of such a nature as to reasonably indicate abuse, neglect, misappropriation, or exploitation that results in a risk to health and welfare of that individual, and such person does not immediately report such information to a law enforcement agency, a county board, or, in the case of an individual living in a developmental center, either to law enforcement or the department. Pursuant to division (C)(1) of section 5123.61 of the Revised Code, such report shall be made to the department and the county board when the incident involves an act or omission of an employee of a county board.

(iv) Misappropriation. "Misappropriation" means depriving, defrauding, or otherwise obtaining the real or personal property of an individual by any means prohibited by the Revised Code, including Chapters 2911. and 2913. of the Revised Code.

(v) Neglect. "Neglect" means when there is a duty to do so, failing to provide an individual with medical care, personal care, or other support that consequently results in serious injury or places an individual or another person at risk of serious injury. Serious injury means an injury that results in treatment by a physician, physician assistant, or nurse practitioner.

(vi) Physical abuse. "Physical abuse" means the use of physical force that can reasonably be expected to result in physical harm to an individual. Such physical force may include, but is not limited to, hitting, slapping, pushing, or throwing objects at an individual.

(vii) Prohibited sexual relations. "Prohibited sexual relations" means a developmental disabilities employee engaging in consensual sexual cor

Top

choking relief techniques such as back blows or cardiopulmonary resuscitation, use of an automated external defibrillator, or use of an epinephrine auto injector).

(iv) Missing individual. "Missing individual" means an incident that is not considered neglect and an individual's whereabouts, after immediate measures taken, are unknown and the individual is believed to be at or pose an imminent risk of harm to self or others. An incident when an individual's whereabouts are unknown for longer than the period of time specified in the individual service plan that does not result in imminent risk of harm to self or others shall be investigated as an unusual incident.

(v) Peer-to-peer act. "Peer-to-peer act" means any of the following incidents involving two individuals:

(a) Exploitation which means the unlawful or improper act of using another individual or another individual's resources for monetary or personal benefit, profit, or gain.

(b) Theft which means intentionally depriving another individual of real or personal property valued at twenty dollars or more or property of significant personal value to the individual.

(c) Physical act which means a physical altercation that:

(i) Results in examination or treatment by a physician, physician assistant, or nurse practitioner; or

(ii) Involves strangulation, a bloody nose, a bloody lip, a black eye, a concussion, or biting which causes breaking of the skin; or

Top

(iii) Unapproved behavioral support. "Unapproved behavioral support" means the use of a prohibited measure as defined in rule 5123-2-06 of the Administrative Code or the use of a restrictive measure implemented without approval of the human rights committee or without informed consent of the individual or the individual's guardian in accordance with rule 5123-2-06 of the Administrative Code, when use of the prohibited measure or restrictive measure results in risk to the individual's health or welfare. When use of the prohibited measure or restrictive measure does not result in risk to the individual's health or welfare, the incident shall be investigated as an unusual incident.

(17) "Physical harm" means any injury, illness, or other physiological impairment, regardless of its gravity or duration.

(18) "Primary person involved" means the person alleged to have committed or to have been responsible for the accidental or suspicious death, exploitation, failure to report, misappropriation, neglect, physical abuse, prohibited sexual relations, rights code violation, sexual abuse, or verbal abuse.

(19) "Program implementation incident" means an unusual incident involving the failure to carry out a person-centered plan when such failure causes minimal risk or no risk. Examples include, but are not limited to, failing to provide supervision for short periods of time, automobile accidents without harm, and self-reported incidents with minimal risk.

(20) "Provider" means an agency provider or an independent provider.

(21) "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.

(22) "Specialized services" means any program or service designed and operated to serve primarily individuals, including a program or service provided by an entity lice Top

(D) Reporting requirements for major unusual incidents

(1) Reports regarding all major unusual incidents involving an individual who resides in an intermediate care facility for individuals with intellectual disabilities or who receives round-the-clock waiver services shall be filed and the requirements of this rule followed regardless of where the incident occurred.

(2) Reports regarding the following major unusual incidents shall be filed and the requirements of this rule followed regardless of where the incident occurred:

- (a) Accidental or suspicious death;
- (b) Attempted suicide;
- (c) Death other than accidental or suspicious death;
- (d) Exploitation;
- (e) Failure to report;
- (f) Law enforcement;
- (g) Misappropriation;
- (h) Missing individual;
- (i) Neglect;
- (j) Peer-to-peer act;
- (k) Physical abuse;
- (l) Prohibited sexual relations;
- (m) Sexual abuse; and

Top

(5) Immediately upon receipt of a report or notification of an allegation of a major unusual incident, the county board shall:

- (a) Ensure that all reasonable measures necessary to protect the health and welfare of at-risk individuals have been taken;
- (b) Determine if additional measures are needed; and
- (c) Notify the department if the circumstances in paragraph (I)(1) of this rule that require a department-directed administrative investigation are present. Such notification shall take place on the first working day the county board becomes aware of the incident.

(6) The provider shall immediately, but no later than four hours after discovery of the major unusual incident, notify the county board through means identified by the county board of the following incidents or allegations:

- (a) Accidental or suspicious death;
- (b) Exploitation;
- (c) Misappropriation;
- (d) Neglect;
- (e) Peer-to-peer act;
- (f) Physical abuse;
- (g) Prohibited sexual relations;
- (h) Sexual abuse;
- (i) Verbal abuse; and

Top

(E) Reporting of alleged criminal acts

(1) The provider shall immediately report to the law enforcement entity having jurisdiction of the location where the incident occurred, any allegation of a criminal act. The provider shall document the time, date, and name of person notified of the alleged criminal act. The county board shall ensure that the notification has been made.

(2) The department shall immediately report to the Ohio state highway patrol, any allegation of a criminal act occurring at a developmental center. The department shall document the time, date, and name of person notified of the alleged criminal act.

(F) Abused or neglected children

All allegations of abuse or neglect as defined in sections 2151.03 and 2151.031 of the Revised Code of an individual under the age of twenty-one years shall be immediately reported to the local public children's services agency. The notification may be made by the provider or the county board. The county board shall ensure that the notification has been made.

(G) Notification requirements for major unusual incidents

(1) The provider shall make the following notifications, as applicable, when the major unusual incident or discovery of the major unusual incident occurs when such provider has responsibility for the individual. The notification shall be made on the same day the major unusual incident or discovery of the major unusual incident occurs and include immediate actions taken.

(a) Guardian or other person whom the individual has identified.

(b) Service and support administrator serving the individual.

Top

(1) Each county board shall employ at least one investigative agent or contract with a person or governmental entity for the services of an investigative agent. An investigative agent shall be certified by the department in accordance with rule 5123:2-5-07 of the Administrative Code. Employees of the department who are designated investigators are considered certified investigative agents for the purpose of this rule.

(2) All major unusual incidents require an administrative investigation meeting the applicable administrative investigation procedure in appendix A, appendix B, or appendix C to this rule unless it is not possible or relevant to the administrative investigation to meet a requirement under this rule, in which case the reason shall be documented. Administrative investigations shall be conducted and reviewed by investigative agents.

(a) The department or county board may elect to follow the administrative investigation procedure for category A major unusual incidents for any major unusual incident.

(b) Based on the facts discovered during administrative investigation of the major unusual incident, the category may change or additional categories may be added to the record. If a major unusual incident changes category, the reason for the change shall be documented and the new applicable category administrative investigation procedure shall be followed to investigate the major unusual incident.

(c) Major unusual incidents that involve an active criminal investigation may be closed as soon as the county board ensures that the major unusual incident is properly coded, the history of the primary person involved has been reviewed, cause and contributing factors are determined, a finding is made, and prevention measures implemented. Information needed for closure of the major unusual incident may be obtained from the criminal investigation.

Top

unusual incident or major unusual incident occurs. The intermediate care facility for individuals with intellectual disabilities shall provide a copy of its full report of an administrative investigation of a major unusual incident to the county board. The investigative agent may utilize information from the administrative investigation conducted by the intermediate care facility for individuals with intellectual disabilities to meet the requirements of this rule or conduct a separate administrative investigation. The county board shall provide a copy of its full report of the administrative investigation to the intermediate care facility for individuals with intellectual disabilities. The department shall resolve any conflicts that arise.

(7) When an agency provider, excluding an intermediate care facility for individuals with intellectual disabilities, conducts an internal review of an incident for which a major unusual incident has been filed, the agency provider shall submit the results of its internal review of the incident, including statements and documents, to the county board within fourteen calendar days of the agency provider becoming aware of the incident.

(8) All developmental disabilities employees shall cooperate with administrative investigations conducted by entities authorized to conduct investigations. Providers and county boards shall respond to requests for information within the time frame requested. The time frames identified shall be reasonable.

(9) Except when law enforcement or the public children's service agency is conducting an investigation, the investigative agent shall endeavor to reach a preliminary finding regarding allegations of physical abuse or sexual abuse and notify the individual or individual's guardian and provider of the preliminary finding within fourteen working days. When it is not possible for the investigative agent to reach a preliminary finding within fourteen working days, he or she shall instead notify the individual or individual's guardian and provider of the status of the investigation.

Top

(g) A current member of a county board;

(h) A person having any known relationship with any of the persons specified in paragraphs (I)(1)(a) to (I)(1)(g) of this rule when such relationship may present a conflict of interest or the appearance of a conflict of interest; or

(i) An employee of a county board or a developmental center when it is alleged that the employee is responsible for an individual's death, has committed sexual abuse, engaged in prohibited sexual activity, or committed physical abuse or neglect resulting in emergency room treatment or hospitalization.

(2) A department-directed administrative investigation or administrative investigation review may be conducted following the receipt of a request from a county board, developmental center, provider, individual, or guardian if the department determines that there is a reasonable basis for the request.

(3) The department may conduct a review or administrative investigation of any major unusual incident or may request that a review or administrative investigation be conducted by another county board, a regional council of governments, or any other governmental entity authorized to conduct an investigation.

(J) Written summaries of major unusual incidents

(1) No later than five working days following the county board's, developmental center's, or department's recommendation for closure via the incident tracking system, the county board, developmental center, or department shall provide a written summary of the administrative investigation of each category A or category B major unusual incident, including the allegations, the facts and findings, including as applicable, whether the case was substantiated or unsubstantiated, and preventive measures implemented in response to the major unusual incident to:

Top

department if the department conducted the administrative investigation, within fifteen calendar days following receipt of the findings. An individual may receive assistance from any person selected by the individual to prepare a letter of dispute and provide supporting documentation.

(7) The county board superintendent or his or her designee or the director of the department or his or her designee, as applicable, shall consider the letter of dispute, the supporting documentation, and any other relevant information and issue a determination within thirty calendar days of such submission and take action consistent with such determination, including confirming or modifying the findings or directing that more information be gathered and the findings be reconsidered.

(8) In cases where the letter of dispute has been filed with the county board, the disputant may dispute the final findings made by the county board by filing those findings and any documentation contesting such findings as are disputed with the director of the department within fifteen calendar days of the county board determination. The director of the department shall issue a decision within thirty calendar days.

(K) Review, prevention, and closure of major unusual incidents

(1) Agency providers shall implement a written procedure for the internal review of all major unusual incidents and shall be responsible for taking all reasonable steps necessary to prevent the recurrence of major unusual incidents. The written procedure shall require senior management of the agency provider to be informed within two working days following the day staff become aware of a potential or determined major unusual incident involving misappropriation, neglect, physical abuse, or sexual abuse.

(2) Members of an individual's team shall ensure that risks associated with major unusual incidents are addressed in the individual plan or individual service plan of each
Top

- (i) Prohibited sexual relations;
 - (j) Sexual abuse;
 - (k) Significant injury when cause is unknown;
 - (l) Verbal abuse;
 - (m) Any major unusual incident that is the subject of a director's alert; and
 - (n) Any major unusual incident investigated by the department.
-

(5) The county board shall review and close reports regarding the following major unusual incidents:

- (a) Attempted suicide;
- (b) Failure to report;
- (c) Law enforcement;
- (d) Missing individual;
- (e) Rights code violation;
- (f) Significant injury when cause is known;
- (g) Unanticipated hospitalization; and
- (h) Unapproved behavioral support.

(6) The department may review any case to ensure it has been properly closed and shall conduct sample reviews to ensure proper closure by the county board. The department may reopen any administrative investigation that does not meet the requirements of

Top

(c) Time period of review;

(d) Comparison of data for previous three years;

(e) Explanation of data;

(f) Data for review by major unusual incident category type;

(g) Specific individuals involved in established trends and patterns (i.e., five major unusual incidents of any kind within six months, ten major unusual incidents of any kind within a year, or other pattern identified by the individual's team);

(h) Specific trends by residence, region, or program;

(i) Previously identified trends and patterns; and

(j) Action plans and preventive measures implemented to address noted trends and patterns.

(2) A provider other than a county board shall send the annual report to the county board for all programs operated in the county by February twenty-eighth of each year. The county board shall review the annual report to ensure that all issues have been reasonably addressed to prevent recurrence of major unusual incidents. The county board shall keep the annual report on file and make it available to the department upon request.

(3) A county board that provides specialized services shall send the annual report to the department for all programs operated by the county board by February twenty-eighth of each year. The department shall review the annual report to ensure that all issues have been reasonably addressed to prevent recurrence of major unusual incidents.

Top

been taken. The committee may request that the department obtain additional information as may be necessary to make recommendations.

(M) Requirements for unusual incidents

(1) Unusual incidents shall be reported and investigated by the provider.

(2) Each agency provider shall develop and implement a written unusual incident policy and procedure that:

(a) Identifies what is to be reported as an unusual incident which shall include unusual incidents as defined in this rule;

(b) Requires an employee who becomes aware of an unusual incident to report it to the person designated by the agency provider who can initiate proper action;

(c) Requires the report to be made no later than twenty-four hours after the occurrence of the unusual incident; and

(d) Requires the agency provider to investigate unusual incidents, identify the cause and contributing factors when applicable, and develop preventive measures to protect the health and welfare of any at-risk individuals.

(3) The agency provider shall ensure that all staff are trained and knowledgeable regarding the unusual incident policy and procedure.

(4) The provider providing services when an unusual incident occurs shall notify other providers of services as necessary to ensure continuity of care and support for the individual.

(5) Independent providers shall complete an unusual incident report, notify the individual's guardian or other person whom the individual has identified, as applicable.

Top

implemented, and that trends and patterns have been identified and addressed in accordance with this rule. The sample shall be made available to the department for review upon request.

(2) When the county board is a provider, the department shall review, on a monthly basis, a representative sample of county board logs to ensure that major unusual incidents have been reported, preventive measures have been implemented, and that trends and patterns have been identified and addressed in accordance with this rule. The county board shall submit the specified logs to the department upon request.

(3) 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.

(4) The department shall review and take any action appropriate when a complaint is received about how an administrative investigation is conducted.

(O) Access to records

(1) Reports made under section 5123.61 of the Revised Code and this rule are not public records as defined in section 149.43 of the Revised Code. Records may be provided to parties authorized to receive them in accordance with sections 5123.613 and 5126.044 of the Revised Code, to any governmental entity authorized to investigate the circumstances of the alleged abuse, neglect, misappropriation, or exploitation and to any party to the extent that release of a record is necessary for the health or welfare of an individual.

(2) A county board or the department shall not review, copy, or include in any report required by this rule a provider's personnel records that are confidential under state or federal statutes or rules, including medical and insurance records, workers' Top

including a review of health and welfare alerts issued by the department since the previous year's training.

(Q) Authority of director to modify provisions of this rule

During the COVID-19 state of emergency declared by the governor, the director of the department may:

- (1) Modify the requirement in paragraph (H)(4) of this rule for an investigative agent to conduct all interviews for major unusual incidents to allow a service and support administrator or an employee of an agency provider to conduct interviews working under the guidance of an investigative agent;
- (2) Modify the timeline in paragraph (H)(9) of this rule, from fourteen working days to twenty-one working days, for an investigative agent to reach a preliminary finding and notify the individual or individual's guardian and the provider;
- (3) Modify the requirement in paragraph (H)(10) of this rule to allow the department to grant an extension of the timeline for a county board to submit a report of an administrative investigation for closure in the incident tracking system without the county board being required to submit a request; and/or
- (4) Modify the timeline in paragraph (J)(1) of this rule, from five working days to ten working days, for a county board, a developmental center, or the department to provide a written summary of the administrative investigation of a category A or category B major unusual incident.

[View Appendix](#) [View Appendix](#) [View Appendix](#)

Supplemental Information

[Top](#)

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 5.03 - DEVELOPMENT AND IMPLEMENTATION OF BEHAVIORAL SUPPORT STRATEGIES

- A. This policy sets forth requirements for development and implementation of behavioral support strategies including both positive measures and restrictive measures for the purpose of ensuring:
 - 1. 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;
 - 2. An individual's services and supports are based on an understanding of the individual and the reasons for the individual's actions;
 - 3. 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; and
 - 4. Restrictive measures are used only when necessary to keep people safe and always in conjunction with positive measures.
- B. For the purpose of this policy "individual" refers to individuals that are receiving Medicaid Home and Community-Based Services Waivers administered by the Department of Developmental Disabilities (DODD). Children enrolled in school age services shall follow the behavior intervention guidelines of the Ohio Department of Education and the educational setting in which they are served.
- C. The focus of a behavioral support strategy is the proactive creation of supportive environments that enhance an individual's quality of life by understanding and respecting the individual's needs and expanding opportunities for the individual to communicate and exercise choice and control through identification and implementation of positive measures such as:
 - 1. Emphasizing alternative ways for the individual to communicate needs and to have needs met;
 - 2. Adjusting the physical or social environment;
 - 3. Addressing sensory stimuli;
 - 4. Adjusting schedules; and
 - 5. Establishing trusting relationships.
- D. A behavioral support strategy shall never include prohibited measures. "Prohibited Measures" Include:
 - 1. 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.
 - 2. 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.

3. Use of a manual restraint or mechanical restraint that causes pain or harm to an individual.
 4. Disabling an individual's communication device.
 5. Denial of breakfast, lunch, dinner, snacks, or beverages (excluding denial of snacks or beverages for an individual with primary polydipsia or a compulsive eating disorder attributed to a diagnosed condition such as "Prader-Willi Syndrome," and denial is based on specific medical treatment of the diagnosed condition and approved by the Human Rights Committee.
 6. Placing an individual in a room with no light.
 7. Subjecting an individual to damaging or painful sound.
 8. Application of electric shock to an individual's body excluding electroconvulsive therapy prescribed by a physician as a clinical intervention to treat a diagnosed medical condition and administered by a physician or a credentialed advanced practice registered nurse.
 9. Subjecting an individual to any humiliating or derogatory treatment.
 10. Squirting an individual with any substance as an inducement or consequence for behavior.
 11. Using any restrictive measure for punishment, retaliation, convenience of providers, or as a substitute for specialized services.
- E. A behavioral support strategy may include a restrictive measure. "Restrictive Measure" means a method of last resort that may be used only when necessary to keep people safe and with prior approval in accordance with Section M. of this policy. Restrictive Measures include:
1. 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. A behavioral support strategy may include a manual restraint only when an individual's actions pose risk of harm. 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.
 2. 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. A behavioral support strategy may include a mechanical restraint only when an individual's actions pose a risk of harm. Mechanical restraint shall cease immediately once risk of harm has passed. "Mechanical restraint" does not include:
 - a. A seatbelt of a type found in an ordinary passenger vehicle or an age appropriate child safety seat;
 - b. A medically-necessary device (such as a wheelchair seatbelt or a gait belt) used for supporting or positioning an individual's body; or

- c. A device that is routinely used during a medical procedure for patients without developmental disabilities.
- 3. 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. A behavioral support strategy may include time-out only when an individual’s actions pose risk of harm.
 - a. Time-out shall not exceed thirty minutes for any one incident nor one hour in any twenty-four-hour period.
 - b. 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.
 - c. A time-out room or area shall be adequately lighted and ventilated and provide a safe environment for the individual.
 - d. 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.
 - e. An individual in a time-out room or area shall be under constant visual supervision by staff.
 - f. 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.
 - g. 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.
- 4. Chemical restraint. “Chemical restraint” means the use of medication in accordance with scheduled dosing or pro re nata (“PRN” or as needed) for the purpose of causing a general or non-specific blunt suppression of behavior (i.e. the effect of the medication results in a noticeable or discernible difference in the individual’s ability to complete activities of daily living) or for the purpose of treating sexual offending behavior. A behavior strategy may include chemical restraint only when an individual’s actions pose risk of harm or an individual engages in a precisely-defined pattern of behavior that is very likely to result in risk of harm.
 - a. A medication prescribed for the treatment of a physical or psychiatric condition in accordance with the standards of treatment for that condition and not for the purpose of causing a general or non-specific blunt suppression of behavior, is presumed to not be a chemical restraint.
 - b. “Chemical restraint” does not include a medication that is routinely prescribed in conjunction with a medical procedure of patients without developmental disabilities.
- 5. Restriction of an individual’s rights as enumerated in section 5123.62 of the Revised Code. A behavioral support strategy may include a rights restriction 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 tobacco products).

- F. "Risk of harm" means there exists a direct and serious risk of physical harm to an individual or another person. For risk of harm, an individual must be capable of causing harm to self or others and be causing physical harm to self or others or very likely to begin doing so.
- G. A behavioral support strategy that includes restrictive measures requires:
 - 1. Documentation that demonstrates that positive measures have been employed and have been determined ineffective;
 - 2. An assessment conducted within the past twelve months that clearly describes:
 - a. The behavior that poses risk of harm or likelihood of legal sanction or the individual's engagement in a precisely-defined pattern of behavior (a documented and predictable sequence of actions that if left uninterrupted, will very likely result in physical harm to self or others) that is very likely to result in risk of harm;
 - b. The level of harm or type of legal sanction that could reasonably be expected to occur with the behavior;
 - c. When the behavior is likely to occur;
 - d. The individual's interpersonal, environmental, medical, mental health, communication, sensory, and emotional needs, diagnosis, and life history including traumatic experiences as a means to gain insight into origins and patterns of the individual's actions; and
 - e. The nature and degree of risk to the individual if the restrictive measure is implemented.
 - 3. A description of actions to be taken to:
 - a. Mitigate risk of harm or likelihood of legal sanction;
 - b. Reduce and ultimately eliminate the need for restrictive measures; and
 - c. Ensure environments where the individual has access to preferred activities and is less likely to engage in unsafe actions due to boredom, frustration, lack of effective communication, or unrecognized health problems.
- H. Persons who conduct assessments and develop behavioral support strategies that include restrictive measures shall:
 - 1. Hold a valid license issued by the Ohio Board of Psychology;
 - 2. Hold a valid license issued by the Ohio counselor, social worker and marriage and family therapist board;
 - 3. Hold a valid physician license issued by the state medical board or Ohio; or
 - 4. 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.

- I. Behavioral support strategy that includes restrictive measures shall:
 - 1. Be designed in a manner that promotes healing, recovery, and resilience;
 - 2. Have the goal of helping the individual to achieve outcomes and pursue interests while reducing or eliminating the need for restrictive measures to ensure safety;
 - 3. Describe tangible outcomes and goals and how progress toward achievement of outcomes and goals will be identified;
 - 4. Recognize the role environment has on behavior;
 - 5. Capitalize on the individual's strengths to meet challenges and needs;
 - 6. Delineate restrictive measures to be implemented and identify those who are responsible for implementation;
 - 7. Specify steps to be taken to ensure the safety of the individual and others;
 - 8. As applicable, identify needed services and supports to assist the individual in meeting court-ordered community controls such as a mandated sex offender registration, drug-testing, or participation in mental health treatment; and
 - 9. 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.
- J. A behavioral support strategy that includes chemical restraint, manual restraint, or time-out will specify when and how the provider will notify the individual's guardian when such restraint is used.
- K. When a behavioral support strategy that includes restrictive measures is proposed by an individual and the individual's team, the Behavior Support Specialist shall:
 - 1. Ensure the strategy is developed in accordance with the principles of person-centered planning and trauma informed care and incorporated as an integral part of the individual service plan.
 - 2. When indicated, seek input from persons with specialized expertise to address an individual's specific support needs.
 - 3. Submit to the Human Rights committee the strategy and documentation, including the record of restrictive measures, based upon the assessment that clearly indicates:
 - a. The justification for the proposed restrictive measure, that is:
 - i. When manual restraint, mechanical restraint, or time-out is proposed—risk of harm;
 - ii. When chemical restraint is proposed—risk of harm or how the individual's engagement in a precisely-defined pattern of behavior is very likely to result in risk of harm; or
 - iii. When rights restriction is proposed—risk of harm or how the individual's actions are very likely to result in the individual being the subject of a legal sanction.
 - b. The nature and degree of risk to the individual if the restrictive measure is implemented.
 - c. The record of restrictive measures submitted shall include: the service provider's record of the date, time, and antecedent factors regarding each event of a restrictive measure other than a restrictive measure that is not based on

- antecedent factors (e.g. be alarm or locked cabinet). The record for each event of a manual restraint or a mechanical restraint will include the duration.
4. Ensure the strategy is reviewed and approved in accordance with Section M. of this policy prior to implementation and whenever the behavioral support strategy is revised to add restrictive measures.
 5. Secure informed consent of the individual or the individual's guardian, as applicable.
 6. Ensure the strategy is reviewed by the individual and the individual's team at least every ninety calendar days or more frequently when specified by the Human Rights Committee to determine and document the effectiveness of the strategy and whether the strategy should be continued, discontinued, or revised.
 - a. The review shall consider:
 - i. Numeric data on changes in the severity or frequency of behaviors that had been targeted for reduction due to a threat to safety or wellbeing;
 - ii. New skills that have been developed which have reduced or eliminated threats to safety or wellbeing;
 - iii. The individual's self-report of overall satisfaction in achieving desired outcomes and pursuing interests; and
 - iv. Observations by paid staff and/or natural supports as they relate to safety or wellbeing and the individual's achievement of desired outcomes and pursuit of interests.
 - b. When a manual restraint has been used in the past ninety calendar days, the review shall include seeking the perspective of the individual and at least one direct support professional involved in use of the manual restraint regarding the reason the manual restraint occurred and what could be done differently in the future to avoid manual restraint.
 - c. A decision to continue the strategy shall be based upon review of up-to-date information justifying continuation of the strategy.
- L. Reconsideration of medication initially presumed to not be a chemical restraint
1. When a Service and Support Administrator (SSA) or Behavior Support Specialist has been made aware of an administration of a medication initially presumed to not be a chemical restraint in accordance with (D)(4) of this policy actually results in a general or non-specific blunt suppression of behavior, the SSA or Behavior Support Specialist shall ensure the prescriber of the medication and the individual's team are notified.
 2. When the prescriber of the medication is not inclined to adjust the medication, the individual's team is to meet to consider what actions may be necessary (e.g. seeking an opinion from a different prescriber of introducing activities that may mitigate the impact of the medication on the individual's ability to complete activities of daily living).
 3. When a medication (as originally administered or as adjusted) continues to cause a general or non-specific blunt suppression of behavior beyond thirty calendar days, the medication shall be regarded as a chemical restraint and submitted to the Human Rights Committee.

M. Review of behavioral support strategies that include restrictive measures

1. Emergency Request: an individual's behavior presents an immediate danger of physical harm to the individual or another person or the individual being the subject of a legal sanction and all available positive measures have proved ineffective or infeasible.
 - a. Emergency Request shall consist of:
 - i. A description of the restrictive measures to be implemented;
 - ii. Documentation of risk of harm or legal sanction which demonstrates the situation is an emergency;
 - iii. A description of positive measures that have been implemented and proved ineffective or infeasible;
 - iv. Any medical contraindications; and
 - v. Informed consent by the individual or the individual's guardian, as applicable
 - b. Prior to implementation of a behavioral support strategy submitted via the emergency request process, the strategy shall be approved by the Superintendent or the Superintendent's designee.
 - c. A behavior support strategy approved via the emergency request process may be in place for a period not to exceed forty-five calendar days. Continuation of the strategy beyond the initial forty-five calendar days requires approval by the Human Rights Committee in accordance of Section N. of this policy.
2. Routine Request
 - a. Absent an emergency, the Human Rights Committee shall review a request to implement a behavioral support strategy that includes restrictive measures.
 - b. An individual or the individual's guardian, as applicable, shall be notified at least seventy-two hours in advance of the date, time, and location of the Human Rights Committee Meeting at which the individual's behavioral support strategy will be reviewed. The individual or guardian has the right to attend to present related information in advance of the Human Rights Committee commencing its review.

N. Human Rights Committee

1. The Human Rights Committee safeguards individuals' rights and protects individuals from physical, emotional, and psychological harm.
2. The committee shall be composed of at least four members appointed by the Superintendent or designee, and shall
 - a. Include at least one individual who receives or is eligible to receive services from the Board;
 - b. Include qualified persons who have either experience or training in contemporary practices of behavioral support; and
 - c. Reflect a balance of representative from each of the following two groups:
 - i. Individuals who receive or are eligible to receive Lawrence County DD services or family members or guardians of individuals who receive or are eligible to receive Lawrence County DD services; and
 - ii. Lawrence County DD staff, providers, or other professionals.
3. 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 the individual's

guardian and the individual's team.

4. In its review of an individual's behavioral support strategy, the Human Rights Committee is to:
 - a. Ensure that the planning process outlined in this policy has been followed and that the individual or the individual's guardian, as applicable, has provided informed consent.
 - b. Ensure that the proposed restrictive measures are necessary to reduce risk of harm or likelihood of legal sanction;
 - c. When indicated, seek input from persons with specialized expertise to address an individual's specific support needs.
 - d. 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;
 - e. Ensure that a restrictive measure is temporary in nature and occurs only in specifically-defined situations based on:
 - i. Risk of harm for manual restraint, mechanical restraint, or time-out;
 - ii. Risk of harm or an individuals' engagement in a precisely-defined pattern of behavior that is very likely to result in risk of harm for chemical restraint; or
 - iii. Risk of harm or likelihood of legal sanction for a rights restriction.
 - f. Verify that any behavioral support strategy that includes restrictive measures also incorporates positive measures designed to enable the individual to feel safe, respected, and valued while emphasizing choice, self-determination, and an improved quality of life;
 - g. Determine the period of time for which a restrictive measure is appropriate and may approve a strategy that includes restrictive measures for any number of days not to exceed three hundred sixty-five.
 - h. Approve in whole or in part, reject in whole or in part, monitor, and when indicated, reauthorize behavioral support strategies that include restrictive measures.
 - i. Communicate the committee's determination including an explanation of its rejection of a strategy in writing to the Behavior Support Specialist or the individual's Service and Support Administrator.
5. Members of the Human Rights Committee shall receive training approved by the Ohio Department of Developmental Disabilities (DODD) within three months of appointment to the committee. This training shall include: rights of individuals as enumerated in section 5123.62 of the Revised Code, person-centered planning, informed consent, confidentiality, and the requirements listed in 5123-2-06 of the Revised Code.
6. Members of the Human Rights Committee shall annually receive training approved by DODD in relevant 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.

- O. The Behavior Support Specialist or SSA shall communicate in writing to the individual or the individual's guardian, as applicable, the determination of the Human Rights Committee including an explanation of rejection of a strategy as well as the individual's or guardian's right to seek reconsideration when the Human Rights Committee rejects a strategy.
- P. The individual or the individual's guardian, as applicable, may seek reconsideration of rejection by the Human Rights Committee of a strategy that includes restrictive measures by submitting a written request for reconsideration with additional information provided as rationale for the request to the Behavior Support Specialist or the individual's SSA within fourteen calendar days of being informed of the rejection. The Behavior Support Specialist or SSA shall forward the request to the Chairperson of the Human Rights Committee within seventy-two hours or receipt. The Human Rights Committee will consider the request for reconsideration and respond in writing to the individual or guardian within fourteen calendar days of receiving the request.
- Q. An individual or the individual's guardian, as applicable, may seek administrative resolution in accordance with OAC 5123-4-04 if the individual or guardian is dissatisfied with the strategy or the process used for development of the strategy.
- R. Upon securing approval in accordance with section M. of this policy, prior to implementation of a behavioral support strategy that includes restrictive measures, and when a restrictive measure is discontinued the Board shall notify DODD in a format prescribed by DODD.
- S. 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 in accordance with Section M. of this policy shall be reported as an "unapproved behavioral support" in accordance with 5123-17-02 of the Administrative Code. Nothing in this policy 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.
- T. The Behavior Support Specialist shall annually compile and analyze aggregate data extracted from the department's restrictive measure notification application regarding behavioral support strategies that include restrictive measures and furnish the data and analyses to the Human Rights Committee by March fifteenth of each year for the preceding calendar year. The Board shall make the data and analyses available to DODD upon request. Data compiled and analyzed shall include, but are not limited to:
 - 1. Nature and frequency of risk of harm or likelihood of legal sanction that triggered development of strategies that include restrictive measures;
 - 2. Number of strategies that include restrictive measures by type of restrictive

measure (i.e. chemical restraint, manual restraint, mechanical restraint, rights restriction, and time-out reviewed, approved, rejected, and reauthorized in accordance with Section M. of this policy.

3. Number of restrictive measures by type of restrictive measure (i.e. chemical restraint, manual restraint, mechanical restraint, rights restriction, and time-out) implemented;
4. Number of strategies that include restrictive measures that have been discontinued and the reasons for discontinuing the strategies; and
5. An in-depth review and analysis of either:
 - a. Trends and patterns regarding strategies that include restrictive measures 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; or
 - b. A sample of implemented strategies that include restrictive measures for purposes of ensuring that strategies are developed, implemented, documented, and monitored in accordance with this policy.

Revised: 09/14/22

Revised: 12/14/21

Revised: 9/22/15

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES

POLICY 5.04 - QUALITY ASSURANCE

- A. To assure that individuals and families are receiving high quality services, Lawrence County Developmental Disabilities is committed to implementing an effective quality assurance and continuous improvement process that consists of both formal and informal activities.
- B. In accordance with OAC 5123-6-07, compliance and quality assessment reviews of each provider location in the county where certified developmental disabilities personnel perform health-related activities, administer oral prescribed medication, administer topical prescribed medication, administer topical over-the-counter musculoskeletal medication, administer oxygen, or administer metered dose inhaled medication for individuals shall be conducted for individuals who:
 - 1. Receive services from certified supported living providers;
 - 2. Receive residential support services from certified home and community-based services providers, if the services are received in a community living arrangement that includes not more than four individuals;
 - 3. Receive adult services in a setting where sixteen or fewer individuals receive services; and
 - 4. Reside in residential facilities of five or fewer beds, excluding intermediate care facilities for individuals with intellectual disabilities.
- C. The quality assessment review will be conducted at least once every three years. The reviews may be conducted more frequently if the quality assessment registered nurse, county board provider, or department determines there are issues to warrant such.
- D. The Board shall cooperate fully with reviewers from local, state and federal entities.

Revised: 03/08/22

Revised: 10/08/19

Revised: 08/13/19

Revised: 06/21/11

Adopted: 02/21/06

MEDICATION ADMINISTRATION AND DELEGATED NURSING DEFINITIONS

Definitions of terms used in Chapter 5123:2-6 of the Administrative Code.

The following definitions shall apply to this chapter:

- (A) "Adult services" has the same meaning as in section 5126.01 of the Revised Code.
- (B) "Annually" means within a three-hundred-sixty-five-day span of time.
- (C) "Business day" means a day of the week, excluding Saturday, Sunday, or a legal holiday as defined in section 1.14 of the Revised Code.
- (D) "Certified home and community-based services provider" means a person or government entity certified under section 5123.045 of the Revised Code.
- (E) "Certified supported living provider" means a person or government entity certified under section 5123.161 of the Revised Code.
- (F) "Contact hour" has the same meaning as in Chapter 4723-14 of the Administrative Code.
- (G) "County board" means a county board of developmental disabilities.
- (H) "Delegable nursing task" means a nursing task, which a licensed nurse has determined meets the provisions listed in Chapter 4723-13 of the Administrative Code.
- (I) "Delegating nurse" means the licensed nurse who transfers the responsibility for performance of selected nursing tasks and/or medication administration to developmental disabilities personnel who have been trained and/or certified to do so, while retaining accountability of outcome. The delegating nurse determines the level of supervision required to ensure adequate oversight of developmental disabilities personnel to perform nursing tasks and/or administer medication. The delegating nurse is not necessarily the same nurse as the nurse who trains developmental disabilities personnel.
- (J) "Department" means the Ohio department of developmental disabilities.
- (K) "Department-approved curriculum" means the standards for instruction, training, and performance approved by the Ohio department of developmental disabilities.
- (L) "Developmental disabilities personnel" means the workers who provide specialized services to individuals with developmental disabilities:
 - (1) Through direct employment with the Ohio department of developmental disabilities or a county board;
5123:2-6-01 2
 - (2) Through an entity under contract with the Ohio department of developmental disabilities or a county board;
 - (3) Through direct employment or being under contract with private entities, including private entities that operate residential facilities; or
 - (4) As an independent provider.
- (M) "Director" means the director of the Ohio department of developmental disabilities or his or her designee.
- (N) "Drug" has the same meaning as in section 4729.01 of the Revised Code.
- (O) "Employer oversight" means the monitoring of developmental disabilities personnel and ensuring developmental disabilities personnel perform health-related activities and administer medication in accordance with this chapter.
- (P) "Family support services" has the same meaning as in section 5126.01 of the Revised Code.

(Q) "Health-related activities" means only:

- (1) Taking vital signs;
- (2) Application of clean dressings that do not require health assessment;
- (3) Basic measurement of bodily intake and output;
- (4) Oral suctioning;
- (5) Use of glucometers;
- (6) External urinary catheter care;
- (7) Emptying and replacing ostomy bags;
- (8) Pulse oximetry reading;
- (9) Use of continuous positive airway pressure machines, including biphasic positive airway machines;
- (10) Application of percussion vests;
- (11) Use of cough assist devices and insufflators;
- 5123:2-6-01 3
- (12) Application of prescribed compression hosiery; and
- (13) Collection of specimens by noninvasive means.

(R) "Independent provider" has the same meaning as in section 5123.16 of the Revised Code.

(S) "Individual" means a person with a developmental disability.

(T) "Individual plan" or "individual service plan" means the written description of services, supports, and activities to be provided to an individual.

(U) "Individual-specific training" means training provided to developmental disabilities personnel by a licensed nurse or by an employer of developmental disabilities personnel through employer oversight, which shall address:

- (1) The unique needs of the individual being served;
- (2) A summary of the individual's relevant health care information; and
- (3) Implementation of the individual's health care plan as part of the individual plan or individual service plan.

(V) "Licensed health professional authorized to prescribe drugs" has the same meaning as in section 4729.01 of the Revised Code.

(W) "Licensed nurse" means a registered nurse or a licensed practical nurse who holds a current valid license to practice nursing in Ohio pursuant to Chapter 4723. of the Revised Code.

(X) "Major unusual incident" has the same meaning as in rule 5123:2-17-02 of the Administrative Code.

(Y) "Medicaid" has the same meaning as in section 5162.03 of the Revised Code.

(Z) "Medication/treatment error" means:

- (1) Wrong prescribed medication/treatment administered or performed;
- (2) Medication/treatment administered or performed at the wrong time;
- (3) Medication/treatment administered or performed by a route not prescribed or in the case of over-the-counter medication, not as indicated by the manufacturer;
- (4) Incorrect dose or amount of medication/treatment administered or performed;

5123:2-6-01 4

- (5) Expired medication/treatment administered or performed;
- (6) Contaminated medication/treatment administered or performed;
- (7) Improperly stored medication/treatment administered or performed;

- (8) Medication/treatment, other than over-the-counter medication authorized in accordance with section 5123.42 of the Revised Code, administered or performed without corresponding order from a licensed health professional authorized to prescribe drugs;
- (9) Not performing or administering a prescribed medication/treatment during the prescribed time, including failure to ensure the medication/treatment, equipment, or supplies needed to administer or perform the medication/treatment are available at the prescribed time;
- (10) Not documenting a medication/treatment that was administered or performed;
- (11) Administration or performance of prescribed medication/treatment by developmental disabilities personnel without certification or whose certification has expired;
- (12) Administration of over-the-counter medication authorized in accordance with section 5123.42 of the Revised Code by developmental disabilities personnel without required training; and
- (13) Administration or performance of medication/treatment without nursing delegation when nursing delegation is required.
- (AA) "Mentally alert" means the ability of an individual to cognitively understand and communicate specific information pertaining to his or her health, safety, and medication.
- (BB) "Metabolic glycemic disorders" means medical conditions specifically related to metabolism such as diabetes, pre-diabetes, and metabolic syndrome.
- (CC) "Metered dose inhaled medication" means a pre-measured medication administered by inhalation using a hand-held dispenser or aerosol nebulizer.
- (DD) "Nursing delegation" means the process established in rules adopted by the Ohio board of nursing pursuant to Chapter 4723. of the Revised Code under which a registered nurse or licensed practical nurse acting at the direction of a registered nurse transfers responsibility for the performance of a particular nursing activity, 5123:2-6-01 5 task, or prescribed medication administration to another person who is not otherwise authorized to perform the activity, task, or prescribed medication administration.
- (EE) "Nursing task" means those activities that constitute the practice of nursing as a licensed nurse and may include but is not limited to, assistance with activities that are performed to maintain or improve an individual's wellbeing when the individual is unable to perform those activities for himself or herself.
- (FF) "Oral prescribed medication" means any prescribed medication that can be ingested through the mouth.
- (GG) "Over-the-counter medication" means a drug that may be sold and purchased without a prescription, but that unless specifically authorized in division (B)(1)(c) of section 5123.42 of the Revised Code, requires a prescription for administration by unlicensed personnel to a person who is not able to self-administer.
- (HH) "Prescribed medication" means a drug that is to be administered according to the instructions of a licensed health professional authorized to prescribe drugs.
- (II) "Qualified intellectual disability professional" has the same meaning as in 42 C.F.R. 483.430 in effect on the effective date of this rule.
- (JJ) "Quality assessment registered nurse" means a registered nurse who is a registered

nurse instructor or registered nurse trainer employed by or under contract with a county board and who assists with consultation and quality assessment oversight as set forth in rule 5123:2-6-07 of the Administrative Code.

(KK) "Registered nurse instructor" means a registered nurse who is certified by the Ohio department of developmental disabilities in accordance with rule 5123:2-6-04 of the Administrative Code to plan, develop, coordinate, and deliver the registered nurse train-the-trainer program to prepare other registered nurses to train developmental disabilities personnel to:

- (1) Perform health-related activities;
- (2) Administer oral prescribed medication;
- (3) Administer topical prescribed medication;
- (4) Administer topical over-the-counter musculoskeletal medication;
- (5) Administer oxygen and metered dose inhaled medication;

5123:2-6-01 6

(6) Administer prescribed medication through gastrostomy and jejunostomy tubes, if the tubes being used are stable and labeled;

(7) Administer prescribed insulin through subcutaneous injection, inhalation, and insulin pump; and

(8) Administer prescribed medication for the treatment of metabolic glyceimic disorders through subcutaneous injection.

(LL) "Registered nurse trainer" means a registered nurse who is certified by the Ohio department of developmental disabilities in accordance with rule 5123:2-6-04 of the Administrative Code to train developmental disabilities personnel to perform or administer the functions set forth in paragraphs (KK)(1) to (KK)(8) of this rule.

(MM) "Residential facility" has the same meaning as in section 5123.19 of the Revised Code.

(NN) "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.

(OO) "Specialized services" has the same meaning as in section 5123.50 of the Revised Code.

(PP) "Task" means a task that is prescribed, ordered, delegated, or otherwise directed by a health care professional acting within the scope of his or her professional practice.

(QQ) "Topical over-the-counter musculoskeletal medication" means an over-the-counter medication that is applied topically or passes through the skin to provide relief from discomfort in the muscles, joints, or bones.

(RR) "Topical prescribed medication" means any prescribed medication that is applied to the outer skin and drops applied to the eye, ear, or nose. "Topical prescribed medication" may include transdermal prescribed medication or vaginal or rectal suppositories.

(SS) "Unusual incident" has the same meaning as in rule 5123:2-17-02 of the Administrative Code.

(TT) "Vagus nerve stimulator" has the same meaning as "vagal nerve stimulator" as that term is used in section 5123.42 of the Revised Code.

5123:2-6-01 7.

Revised: 9/10/19
Adopted: 2/6/06

MEDICATION ADMINISTRATION AND DELEGATED NURSING

- A. The Lawrence County Developmental Disabilities shall follow 5123.42 of the Revised Code, and OAC Chapter 5123:2-6-03 9 regarding individuals for whom developmental disabilities personnel may perform health-related activities and administer prescribed medications as part of the specialized services DD personnel provide.

Individuals who can self-administer medication or receive assistance with self-administration has the right to self-administer medication or receive assistance with the self-administration of medication, PER OAC 5123:2-6-02.

- B. The LCDD recognizes the authority of DD personnel to administer prescribed oral/topical medications, and perform health-related activities without nursing delegation as part of the specialized services staff provide to individuals while receiving certain services from or through LCDD and subject to staff obtaining the required certification as defined in OAC 5123:2-6-03. Furthermore, staff shall administer prescribed oral/topical medication; perform health-related activities without nursing delegation only as authorized by DODD recognized Certification 1.

The LCDD recognizes the authority of DD personnel to administer prescribed oral/topical medications, and perform health-related activities with nursing delegation as part of the specialized services staff provide to individuals while receiving certain services from or through LCDD and subject to staff obtaining the required Certification 1. Furthermore staff shall administer prescribed oral/topical medication, perform health-related activities with nursing delegation only as authorized by DODD recognized Certification 1.

- C. The LCDD shall require documentation of administration of prescription medications and health related services performed by staff according to the OAC 5123:2-6-07.
- D. The LCDD recognizes the authority of staff to administer medications through gastrostomy and jejunostomy tubes, and to perform routine tube feedings with nursing delegation as part of the specialized services provided to individuals while receiving certain services from or through the LCDD and subject to staff obtaining the required Certification 1. Furthermore, staff shall administer medications through gastrostomy and jejunostomy tubes, and perform routine tube feedings with nursing delegation only as authorized by DODD Certification 2.
- E. The LCDD requires staff to report errors associated with the administration of medications and health related services according to the OAC 5123:2-6-07(C).
- F. The LCDD shall require an individual or guardian request prior to providing assistance with self-medication, authorized administration of medication, health related activities, and delegated nursing pursuant to OAC 5123:2-6-02.

- G. The LCDD recognizes that only a registered nurse that meets the qualifications list in OAC 5123:2-6-04 may train DD personnel in the administration of medications, performance of health-related activities, and performance of tube feedings. The registered nurse must utilize department approved course content referencing OAC 5123:2-6-04.
- H. The LCDD in accordance with OAC 5123:2-6.03 shall require staff employed by or through the LCDD to have individual specific training prior to administration of prescribed medication or performance of health related activities.
- I. The LCDD in accordance with OAC 5123:2-6-02, shall allow that an individual who can safely self-administer medication or receive assistance with self-administration of medication has the right to self-administer medication or receive assistance with the self-administration of medication. Therefore, the LCDD shall provide assistance with self-administration of medication for those individuals who can safety self-administer medication. For those individuals with guardians, guardians will be requested to make the decision on self-administration of medication should the individual who is the ward of the guardian meet criteria for self-administration of medication as prescribed in the DODD's self-medication assessment.
- J. The LCDD recognizes that nursing delegation for a specific individual does not confer certification to the staff. DODD certification is a prerequisite to delegate nursing and training for specific individuals pursuant to OAC 5123:2-6-03.
- K. The LCDD in accordance with OAC 5123:2-6 shall make available storage of medications as might be required. Therefore, the LCDD shall provide adequate safe storage for each individual's prescription medications pursuant to ORC 3313.713(D).
- L. The LCDD in accordance with OAC 5123:2-6-03, shall recognize the authority of staff to administer routine doses of insulin through subcutaneous injection and insulin pumps with nursing delegation as part of the specialized services staff provide to individuals while receiving certain services from or through the LCDD and subject to staff obtaining the required Certification 3. Furthermore, staff shall administer routine does of insulin through subcutaneous injection and insulin pumps with nursing delegation only as authorized by DODD Certification 3.
- M. If the delegating nurse believes that developmental disabilities personnel have not safely performed or will not safely perform health-related activities or have not safely administered or will not safely administer prescribed medication, the delegating nurse shall:
 - 1. Prohibit the action from commencing or continuing;
 - 2. Immediately notify the employer of the developmental disabilities personnel;

3. If applicable, immediately notify the county board via the major unusual incident reporting system pursuant to rule [5123:2-17-02](#) of the Administrative Code; if applicable, the county board shall notify the quality assessment registered nurse; and
 4. Enter a notation in the certification record of the developmental disabilities personnel in the medication administration information system database described in rule [5123:2-6-07](#) of the Administrative Code.
- N. Developmental disabilities personnel shall not engage in an action or actions subject to the LCDD's prohibition or a delegating nurse's prohibition.
- O. A registered nurse shall reassess nursing delegation and the needs of the individual on an ongoing basis, but at least annually. The reassessment may be more frequent if necessary in the judgment of the delegating registered nurse. The reassessment shall include a determination that:
1. Nursing delegation continues to be necessary;
 2. The individual and circumstances continue to adhere to standards and conditions for nursing delegation in accordance with Chapter 4723-13 of the Administrative Code; and
 3. The developmental disabilities personnel continue to demonstrate the skill to accurately perform the nursing tasks, health-related activities, and prescribed medication administration being delegated.

Revised: 9/10/19

Adopted: 2/6/06

Lawrence County Developmental Disabilities

Policy 5.07 – SURVEILLANCE POLICY

A. Purpose

1. The purpose of this policy is to outline the operation of video and audio surveillance equipment and use of surveillance data recorded on Lawrence County DD (LCDD) owned property.

B. Policy

1. It is the policy of the LCDD to utilize video and audio surveillance equipment on LCDD owned property and vehicles in order to help assure the safety and security of individuals served, employees, property and equipment.
2. The primary usage of the surveillance system will be to verify events if/when issues arise or as incidents occur. There is no requirement for routine monitoring of the recorded data. The surveillance system is not intended to take the place of adequate and responsible supervisory and administrative oversight.
3. The surveillance equipment will record digital data, which will be stored on the equipment's hard drive. If the digital data are not needed to verify events that occur, the digital data will be automatically deleted by being "recorded-over" once the hard drive is full. If the digital data are needed to be kept as a record for use by the LCDD administration, these data will be stored for three (3) years on the LCDD central server with password protection and/or copied to DVD, which will be stored securely. Access to the recorded/stored video/audio data will be limited to only those persons authorized by the Superintendent. A written log will be maintained and made available, documenting each time the digital data is reviewed and by whom.
4. Digital surveillance records will be treated as confidential to the extent provided by law. Digital surveillance records may not be released if recordings fall under the Ohio Student Record Statute, the Family Educational Rights and Privacy Act (FERPA) or the Ohio Public Records Act. If the records are deemed confidential under any federal or state law, a digital surveillance record will only be released through subpoena or court order.
5. No employee, parent, guardian, student, third person, or agency will be permitted to view the digital surveillance record unless approved by the Superintendent and only if an appropriate LCDD administrator (designated by the Superintendent) is present and is supervising the viewing. Only LCDD administrators and authorized maintenance personnel will be permitted to maintain the surveillance equipment.

Reviewed by and approved as to form by Mack Anderson, Lawrence County Asst. Prosecutor on 4/5/22 .

Adopted: 04/12/22

COVID-19 POLICY

Purpose:

To authorize the Superintendent to develop guidelines and take immediate action as necessary to prevent and limit exposure to the COVID-19 virus. Due to the prevalence of the COVID-19 variant, and ever-changing guidance and health orders, guidelines must be reviewed and updated often.

Policy:

- A. The Lawrence County DD Board authorizes the Superintendent to develop and update guidelines as needed for COVID-19 prevention in all facility and community based programs. The guidelines will be in accordance with all applicable health orders, CDC guidance, and guidance from DODD
- B. The Superintendent is also authorized to take immediate action to protect staff and visitors in Lawrence County DD facilities and community settings as necessary to prevent the spread of COVID-19. Any immediate actions taken will be made in consultation with local health authorities.

Approved 8/10/21

PREADMISSION SCREENING AND RESIDENT REVIEW

- A. In accordance with the Ohio Administrative Code 5123-14-01, the Service and Support Administration Department of Lawrence County Developmental Disabilities (LCDD) shall participate in the Preadmission Screening and Resident Review (PASRR) evaluation process for individuals who are seeking admission to a nursing facility (NF) who have indications of a developmental disability (DD), residents of a NF who have indications of a DD, and persons acting on behalf of these applicants or residents. The purpose of the PASRR evaluation is to determine whether an individual is eligible for admission to a NF or eligible to continue to receive services in a NF.
- B. Level II evaluation for developmental disabilities
1. Within seven business days of receipt of a notification by DODD for a level II evaluation for developmental disabilities, the Service and Support Administrator (SSA) shall:
 - a. gather data,
 - b. complete an evaluation, and
 - c. submit its recommendations in the form of a written evaluative report to the Ohio Department of Developmental Disabilities (DODD) regarding whether the individual has DD and whether NF services and specialized services are required.
 2. The SSA shall request any information necessary to make the level II evaluation for developmental disabilities and recommendations. The evaluation shall be based on relevant data that are valid, accurate, and reflect the current functional status of the individual being evaluated.
 3. The SSA completing level II evaluations for developmental disabilities shall not have a direct or indirect affiliation with a NF.
 4. The following individuals shall be involved in level II evaluations for developmental disabilities:
 - a. the individual being evaluated,
 - b. the individual's guardian,
 - c. and the individual's family if available and if the individual or guardian agrees to family participation.
 5. Level II evaluations for developmental disabilities shall be adapted to the cultural background, language, ethnic origin, and means of communication used by the individual being evaluated.
 6. Level II evaluations for developmental disabilities shall include three components:
 - a. Developmental disabilities assessment based on documentation of:
 - i. intellectual functioning as measured by a psychologist or other related condition(s) as identified by a physician; and
 - ii. a determination of whether the individual meets DD eligibility criteria (ORC 5123.01).
 - b. NF needs assessment based on evaluation of written documentation which shall include:

- i. the history and physical examination performed per OAC 5123-14-01,
 - ii. current nursing care needs,
 - iii. current care medications,
 - iv. current functional status, including therapy assessment and reports, and
 - v. current social history, including current living arrangement prior to admission and any medical problems, including their impact on the individual's independent functioning.
 - c. Specialized services for DD needs assessment
 - i. The SSA shall evaluate and recommend whether the individual currently has a need for specialized services for DD and shall submit to DODD the recommendation, the type of specialized services for DD to be provided, and who will provide the specialized services.
 - 7. If the individual does not meet DD eligibility criteria, no further review is required. The SSA shall submit documentation and a recommendation to DODD that the individual is to be ruled out.
 - 8. The SSA shall submit recommendations to DODD regarding whether the individual has DD and whether nursing facility services and specialized services for DD are required. The report shall:
 - a. identify the name and professional title of the persons who performed the evaluations and the dates upon which the evaluations were performed;
 - b. provide a summary of the evaluated individual's medical and social history;
 - c. if NF services are recommended, identify the services which are required to meet the evaluated individual's needs;
 - d. identify whether specialized services for DD are needed;
 - e. include the basis for the report's conclusions; and
 - f. include copies of the documentation gathered and reviewed.
 - 9. When it is determined by DODD that the individual does not require the level of services provided by a NF and therefore shall not be admitted to a NF, the SSA shall assist the individual/guardian with alternative placement options, services, and resources necessary to ensure the health and welfare of the individual.
- C. Resident Review for DD
- 1. Within seven business days of receipt of a notification by DODD for a resident review, the SSA shall:
 - a. gather data,
 - b. complete an evaluation, and
 - c. submit its recommendations and documentation to DODD in accordance with section B. of this policy.
 - 2. For individuals with a developmental disability who are discharged from a NF, the SSA shall work in conjunction with the NF to arrange for a safe and orderly discharge to an appropriate setting. The SSA shall coordinate services to meet the individual's specialized service needs as identified in the ISP.
- D. The individual/guardian may appeal adverse PASRR determinations made by DODD within ninety (90) calendar days of the date of determination by filing an appeal with

the Ohio Department of Medicaid in accordance with division 5101:6 of the Ohio Administrative Code.

Revised: 8/11/20, 9/10/19, 5/11/10
Reviewed: 2/21/06
Adopted: 10/21/03

SEXUAL OFFENDERS

- A. Ohio's "Sex Offender Registration and Community Notification" law requires all "habitual sex offenders" and adjudicated "sexual predators" (hereinafter "offenders") to register with the sheriff of the county in which they reside. The sheriff must then notify certain community members including the Superintendent of the School District in which such an offender resides. The Lawrence County Developmental Disabilities (LCDD) is committed to assisting the sheriff and local law enforcement agencies with their responsibility for Community Notification of offenders as required by law.
- B. When the Superintendent receives information from the sheriff concerning an offender subject to Community Notification, the Superintendent shall disseminate the information to all LCDD employees whose duties include the supervision of and/or responsibility for students.
- C. Employees who receive said information shall promptly notify the Superintendent if a person subject to Community Notification is observed in the vicinity of the school or a bus stop area. The Superintendent shall notify the local law enforcement agency if, in the judgment of the Superintendent, the presence of the person subject to Community Notification appears to be without a legitimate purpose or otherwise creates concern for the safety of children. The Superintendent shall cooperate with the local law enforcement agency if any additional action is to be taken.
- D. When the Superintendent receives information from the sheriff concerning an offender subject to Community Notification, the Superintendent shall not release any information concerning such offender to any person other than those employees whose duties include the supervision of and/or responsibility for students. The Superintendent shall refer any and all persons who wish to receive information regarding sex offender to the sheriff.

Revised: 9/10/19

Adopted: 5/15/07

LAWRENCE COUNTY BOARD OF DD FOOD SAFETY PROGRAM

- A. According to Section 111 of the Child Nutrition and WIC Reauthorization Act of 2004, amended section 9 (h) of the Richard B. Russell National School Lunch Act requires school food authorities (SFAs) to implement a food safety program for the preparation and service of school meals served to children. The program must be based on Hazard Analysis and Critical Control Point (HACCP) principles and conform to guidance issued by the Department of Agriculture (USDA)
- B. The Lawrence County Board of Developmental Disabilities shall implement a HACCP plan which shall include:
 - 1. Description of Program Overview facility
 - 2. Food Service Policy
 - 3. HACCP Letter for Vendors
 - 4. Standard Operating Procedures (SOP)
- C. The SOP shall maintain three main points
 - 1. All food preparation areas are clean and sanitary, such as workers' hands, utensils, and food contact surfaces. Avoid cross contamination.
 - 2. Temperature control for keeping cold food cold and hot foods hot. Cook to proper temperatures and hold to proper temperatures, and be sure to record those temperatures. A basic, properly calibrated food thermometer (digital or dial) is needed to check for proper temperatures.
 - 3. SOP's can be used both for sanitation and to verify that proper temperatures are being observed, as well as other aspects of a food service operation.
- D. The Board shall operate a food services program in the schools. Food preparation will be centralized to Open Door School
- E. Food service shall include breakfast and lunch in Open Door School through participation in the National Child Nutrition Programs.
- F. The food service staff shall cooperate with the principal of the school in matters essential to the proper functioning of the food services program. Responsibility for the control of students using the cafeteria shall rest with the building principal.
- G. The Board shall approve the prices set for school breakfast, lunch and milk.
- H. As required for participation in the National Child Nutrition Programs, the Board agrees to the following regulations:
 - 1. That breakfast and a "Type A" lunch shall be made available for students.
 - 2. That free and reduced price meals be provided to students who qualify.
 - 3. That the meals available to students meet U.S.D.A. nutritional standards.
 - 4. That the management of food services comply with all federal, state, and local regulations.

I. Students shall also be permitted to bring their lunches from home and to purchase milk.

**THE LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES
WELLNESS POLICIES ON
PHYSICAL ACTIVITY AND NUTRITION**

As required by
The Child Nutrition and WIC Reauthorization Act of 2004

Effective October 28, 2013

LAWRENCE COUNTY DEVELOPMENTAL DISABILITIES WELLNESS POLICIES ON PHYSICAL ACTIVITY AND NUTRITION

Preamble

Whereas, children need access to healthful foods and opportunities to be physically active in order to grow, learn, and thrive;

Whereas, good health fosters student attendance and education;

Whereas, obesity rates have doubled in children and tripled in adolescents over the last two decades, and physical inactivity and excessive calorie intake are the predominant causes of obesity.

Whereas, heart disease, cancer, stroke, and diabetes are responsible for two-thirds of deaths in the United States, and major risk factors for those diseases, including unhealthy eating habits, physical inactivity, and obesity, often are established in childhood;

Whereas; 33% of high school students do not participate in sufficient vigorous physical activity and 72% of high school students do not attend daily physical education classes;

Whereas, only 2% of children (2 to 19 years) eat a healthy diet consistent with the five main recommendations from the Food Guide Pyramid;

Whereas, nationally, the items most commonly sold from school vending machines, school stores, and snack bars include low-nutrition foods and beverages, such as soda, sports drinks, imitation fruit juices, chips, candy, cookies, and snack cakes;

Whereas, school districts around the country are facing significantly fiscal and scheduling constraints; and

Whereas, community participation is essential to the development and implementation of successful school wellness policies;

Thus, the Lawrence County Developmental Disabilities is committed to providing environments that promote and protect children's health, well-being, and ability to learn by supporting healthy eating and physical activity. Therefore, it is the policy of the Lawrence County Developmental Disabilities that:

- LCDD will engage students, parents, teachers, food service professionals, health professionals, and other interested community members in developing, implementing, monitoring, and reviewing district-wide nutrition and physical activity policies.
- All students in grades K-12 will have opportunities, support, and encouragement to be physically active on a regular basis.

- The cafeteria staff will provide students with access to a variety of affordable, nutritious, and appealing foods that meet the health and nutrition needs of students; will accommodate the religious, ethnic, and cultural diversity of the student body in meal planning, and will provide clean, safe, and pleasant settings and adequate time for students to eat.
- To the maximum extent practicable, LCDD will participate in available federal school meal programs (including the School Breakfast Program, National School Lunch Program, Summer Food Service Program, Fruit and Vegetable Snack Program, and Child and Adult Care Food Program).
- Schools will provide nutrition education and physical education to foster lifelong habits of healthy eating and physical activity, and will establish linkages between health education and school meal programs, and with related community services.

To achieve these policy goals:

I. SCHOOL HEALTH COUNCILS

The LCDD create, strengthen, or work within existing school health councils to develop, implement, monitor, review, and, as necessary, revise school nutrition and physical activity policies. The councils also will serve as resources to school sites for implementing those policies. (A school health council consists of a group of individuals representing the school and community, and should include parents, students, and representatives of the school food authority, members of the school board, school administrators, teachers, health professionals, and members of the public.)

II. NUTRITIONAL QUALITY OF ALL FOODS AVAILABLE ON CAMPUS

School Meals

Meals served through the National School Lunch and Breakfast Programs will:

- Be appealing and attractive to children;
- Be served in clean and pleasant setting;
- Meet, at a minimum, nutrition requirements established by local, state, and federal statutes and regulations;
- Offer a variety of fruits and vegetables;²
- Will serve only low fat and non-fat milk and nutritionally equivalent non-dairy alternatives (to be defined by USDA);
- Ensure that half of the served grains are whole grain.³

Breakfast To ensure that all children have breakfast, either at home or at school, in order to meet their nutritional needs and enhance their ability to learn:

- LCDD will, to the extent possible, arrange bus schedules and utilize methods to serve school breakfasts and encourage participation.

- Breakfast will be made available to children eligible for free or reduced-price meals.
- LCDD will encourage parents to provide a healthy breakfast for their children through newsletter articles, take-home materials, or other means.

Meal Times Schools

- Will provide students with 15 minutes to eat after sitting down for breakfast and 30 minutes for lunch period
- Should schedule meal periods at approximate times, e.g. lunch should be scheduled between 10:45a.m. and 12:30p.m.;
- Should not schedule tutoring, club, or organizational meetings or activities during mealtimes, unless students may eat during such activities;
- Will provide students access to hand washing or hand sanitizing before they eat meals or snacks; and

² To the extent possible schools will offer at least two non-fried vegetables and two fruit options each day and will offer five different fruits and five different vegetables over the course of a week. Schools are encouraged to source fresh fruits and vegetables from local farmers when practicable.

³ A whole grain is one labeled as a “whole” grain product or with a whole grain listed as the primary grain ingredient in the ingredient statement. Examples include “whole” wheat flour, cracked wheat, brown rice, and oatmeal.

Qualifications of School Food Service Staff: Continuing professional development for all food service staff in LCDD shall be established as a part of the school district’s responsibility for operating a food service program.

Sharing of Foods and Beverages: LCDD should discourage students from sharing their foods or beverages with one another during meal or snack times, given concerns about allergies and other restrictions on some children’s diets.

Foods and Beverages Sold Individually (i.e., foods sold outside of reimbursable school meals, such as through vending machines, fundraisers, school stores, etc.)

- LCDD does not participate in Ala Carte Sales. LCDD does not have a vending machine on site.

Fundraising Activities: School fund-raisers shall not undermine students’ nutrition and health and will encourage alternatives that do not involve food or that use only foods that meet the above nutritious standards for foods sold individually. Fund-raisers that promote physical activity are encouraged.

Snacks: Snacks served during the school day will make a positive contribution to children’s diets and health, with an emphasis on serving fruits and vegetables as the primary snacks and water as the primary beverage. Schools will assess if and when to offer snacks based on timing of school meals, children’s nutritional needs, children’s ages, and other considerations. LCDD will

disseminate a list of healthful snack items to teachers, after-school program personnel, and parents.

- If eligible, LCDD that provide snacks through after-school programs will pursue receiving reimbursements through the National School Lunch Program. (LCDD does not participate in after-school programs)

Rewards: Foods or beverages, especially those that do not meet the nutrition standards for foods and beverages (above), are not recommended to be used as a reward for academic performance or good behavior ⁷ and will not withhold food or beverages (including food served through school meals) as a punishment.

Celebrations: LCDD should limit celebrations that involve food during the school day to no more than one party per class per month. Each party should include no more than one food or beverage that does not meet nutrition standards.

⁷ Unless this practice is allowed by a student's individual education plan (IEP).

III. NUTRITION EDUCATION, PROMOTION, AND MARKETING

Nutrition Education and Promotion: LCDD will provide nutrition and health education to foster lifelong habits of healthy eating and linkages with school meal programs and nutrition-related community services. Toward that end, nutrition and health education should:

- Be provided at each grade level as part of a sequential, comprehensive, standards-based program designed to provide students with the knowledge and skills necessary to promote and protect their health;
- Be part of not only health education classes, but also classroom instruction in subjects such as math, science, language arts, social sciences, and elective subjects;
- Include enjoyable, developmentally-appropriate, culturally-relevant, participatory activities, such as contests, promotions, taste testing, and farm visits;
- Promote fruits, vegetables, whole grain products, low-fat and fat-free dairy products, healthy food preparation methods, and health-enhancing nutrition practices;
- Emphasizes caloric balance between food intake and energy expenditure (physical activity/exercise);
- Links with school meal programs, other school foods, and nutrition-related community services;
- Includes training for teachers and other staff

Guidance to Parents: Parents are encouraged to support LCDD nutrition promotion efforts by packing healthy lunches and snacks when send food from home. Parents are urged to include fruits and vegetables and to refrain from including beverages and foods that do not meet the nutrition standards.

Marketing in Schools: New marketed items for low-nutrition foods or brands on school campuses will be prohibited.⁸ Marketed items must meet the nutritional guidelines as set forth in this policy.

⁸ Advertising of low-nutrition foods and beverages is permitted in supplementary classroom and library materials, such as newspapers, magazines, the Internet, and similar media, when such materials are used in a class lesson or activity, or as a research tool.

Staff Wellness: LCDD highly values the health and well-being of *every* staff member. Organized activities are encouraged and support personal efforts on the part of staff to maintain a healthy lifestyle.

IV. PHYSICAL EDUCATION AND OTHER PHYSICAL ACTIVITY

- Students are given opportunities for physical activity during the school day through physical education classes, daily recess periods for elementary school students, and the integration of physical activity into the academic curriculum.
- Students are given opportunities for physical activity through sport programs such as basketball, cheerleading, bowling, swimming, archery, transition to work, etc.
- LCDD encourage parents and guardians to support their children's participation in physical activity, to be physically active role models, and to include physical activity in family events.

V. EVALUATION/COMPLIANCE

The superintendent or designee will ensure compliance with established district-wide nutrition and physical activity wellness policies. In each school, the principal or designee will ensure compliance with those policies in his/her building and will report on the school's compliance to the school district superintendent or designee. The school food services shall ensure compliance within the school food service facilities.

LCDD will conduct a yearly ongoing evaluation, revision, and implementation of the wellness policies.

APPENDIX

Healthy Snacks

The following are suggestions only, nor is it an all exclusive list.

Dairy

- String Cheese and fruit (canned or fresh)
- Non-fat cottage cheese or yogurt with fruit
- Smoothies with milk or yogurt and sliced bananas or strawberries
- Whole-wheat crackers with cheese or peanut butter
- Yogurt with fresh fruit or granola
- Low-fat chocolate milk
- Scoop of ice cream or frozen yogurt with fresh berries

Fresh fruits and vegetables

- Raw vegetable sticks with low-fat yogurt dip, cottage cheese or hummus
- Apples and cheese- pears and other fresh fruits work too!
- Baby carrots
- Fruit Salad
- Applesauce cups (unsweetened)
- Frozen fruit bars
- Dried fruit such as raisins or plums or nuts
- Un-sweetened fruit juices

Low-fat grains

- Cereal- dry or with milk
- Baked potato chips or tortilla chips with salsa
- Pretzels (lightly salted or unsalted) and a glass of milk
- Bagels with tomato sauce and melted cheese
- Flavored-rice cakes (like caramel or apple cinnamon) with peanut butter
- Popcorn- air popped or low-fat microwave
- Whole-grain crackers or English muffin with peanut butter
- Vanilla wafers, gingersnaps, graham crackers, animal crackers or fig bars and a glass of Milk
- Bread sticks or pita chips with dip
- Mini-muffins (low-fat)

USE OF BUILDINGS

- A. The Agency wishes to make all county-owned Agency facilities available for community use under the provision of the law, whenever such use does not interfere with program activities.
- B. The Agency reserves the right to charge a commensurate rate, set by the Superintendent, for the use of its buildings.
- C. The Agency shall prohibit the use of county property by individuals or organizations when such use is primarily for profit.
- D. Upon application of a responsible group, organization or individual, facilities operated by the Lawrence County DD may be made available for civic, social, educational and recreational meetings, as well as other uses approved by the Superintendent.
- E. The following rules shall apply to any individual or group of individuals granted approval for use of Agency facilities:
 - 1. Those individuals or groups of individuals who have been given authorization and approval to use a particular facility or specific area will be restricted solely to that facility or specific area. Use of or entry into areas for which approval has not been obtained specifically is prohibited.
 - 2. All individuals or groups of individuals making application for use of LCDD facilities are required to register their names and addresses with the designated administrator through the attached form.
 - 3. All individuals and groups of individuals shall be held responsible for any and all damage done to the property which is over and above ordinary wear.
 - 4. All individuals or groups of individuals are expected to conduct themselves in an orderly, civil and respectable manner at all times. Profanity, breaches of the peace, or any other form of anti-social behavior will not be tolerated and will be grounds for ejection and future debarment.
 - 5. The presence of alcoholic beverages and all other controlled or illegal substances are expressly prohibited from the premises and will be grounds for ejection and future debarment.
 - 6. All individuals or groups of individuals will be required to leave those facilities and areas which they have used in the same condition in which they were found.
 - 7. In the event of scheduling conflicts among perspective users, the facilities will be made available on an equitable and impartial basis.

8. All individuals who apply for the use of LCDD facilities shall be required to execute a release of liability statement prior to the use of said facilities.
 9. The Lawrence County Developmental Disabilities Superintendent reserves the right to refuse to permit the use of such property for any purpose, which in their sole discretion would not harmonize with the Board's mission or stated values.
- F. All facilities operated by the Agency are accessible to individuals with handicapping conditions. The Agency will be in compliance with Section 504 of the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act of 1990.
- G. The LCDD will put into place administrative safeguards to assure there is no disclosure of personal health information protected under HIPPA (Health Insurance Portal and Accountability Act), and student education information protected by FERPA (Family Education Rights and Privacy Act) per the Confidentiality & Computer Security Policy & Procedure Manual: Policy 50.04 - *Confidentiality Safeguards*, and Policy 53.04 - *Facility Security and Access Control*.

FIREARMS & OTHER WEAPONS

- A. The Board has posted at its entrances that firearms are not permitted in any Board building. Accordingly, all persons, except certified law enforcement officers, are prohibited from possessing firearms or other weapons within any of the Board's buildings. Likewise, (except as specified in paragraphs B, C and D for holders of a current concealed weapon license): no person is permitted to possess or carry a firearm or any other weapon anywhere on Board property.
- B. A visitor to the Board, who holds a current concealed carry license may store a concealed firearm within their personal vehicle while parking on the Board's parking areas.
- C. When exercising these concealed carry rights, the visitor must meet the following conditions and be otherwise compliant with the Ohio concealed carry law and regulations.
 - 1. Each firearm and all of the ammunition must remain inside the vehicle while the person is physically present inside the vehicle, or each firearm and all of the ammunition must be locked within the trunk, glove box, or other enclosed compartment or container within or on the vehicle.
 - 2. The vehicle is in a location where it is otherwise permitted to be.
- D. A firearm that is authorized to be stored on the Board's parking area must be the type of firearm covered and permitted for storage and transport under Ohio's concealed carry law.

Revised; 8/13/19
Reviewed: 2/21/06
Adopted: 8/10/04