5122-30-25 Skilled Nursing Care and Changes in a Resident's Health Status
5122-30-26 Provisions of Personal Care in Class One and Two Facilities
5122-30-28 Medication
5122-30-30 Social, Recreational and Leisure Activities

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Webinar Housekeeping

How To Participate in Today's Webinar
1. Use your computer speakers or telephone for audio
2. Download and/or print the handout from your control panel
3. Use your control panel to submit questions in writing

What will NOT be covered Today
1. Will not identify how a particular rule is different from current ACF, Type 1, Type 2, Type 3, AFoH rules
2. Rules that will be covered in future webinars. This includes questions.
More About Questions

- The last session, on November 14, is a Q & A session.

- If there is any question that is not answered during the webinar, or you think of later, you can submit them to me in advance of the webinar, or if you have not yet registered for the webinar, you can submit the questions during the webinar registration process.

- E-mail questions to Janel.Pequignot@mha.ohio.gov with a subject line titled “Residential Webinar Question”
Can multiple staff watch the webinar together under one registration?
- Yes, unless each needs to receive credit for attending training.

Who should participate today:
- Type 1, Type 2, Type 3, ACF, Adult Foster Home providers
  - Currently licensed
  - Interested in obtaining licensure
- Interested stakeholders
  - Community ADAMH/MHRS Boards
  - Other stakeholders

Are These Rules Applicable to Certified SUD Residential Providers:
- NO!

Can I receive CEU Credit for my SW, Nurse, etc. License?
- No.
(A) A class two or class three facility may not provide physical health care activities for the treatment of a serious illness or disease, defined as skilled nursing care in accordance with section 3721.01 of the Revised Code. Skilled nursing care shall be considered to be provided by a residential facility if it is provided by a person employed by or associated with the facility, including a home healthcare company owned by or associated with the owner/operator, or by another person pursuant to an agreement to which neither the resident who receives the services nor their custodian or legal guardian is a party. In the event of such serious illness or disease, the...
(A) ... In the event of such serious illness or disease, the resident may make arrangements for necessary home health, visiting nurse, or similar services. If the resident need assistance in making arrangements, staff of a class 2 facility shall assist the resident in making these arrangements or assure another entity is available to provide the assistance...

(A) ... "Skilled nursing care" means procedures that require technical skills and knowledge beyond those the untrained person possesses and that are commonly employed in providing for the physical, mental, and emotional needs of the ill or otherwise incapacitated. "Skilled nursing care" includes, but is not limited to, the following:

(1) Irrigations, parameterizations, application of dressings, and supervision of special diets;
(A) "Skilled nursing care" includes, but is not limited to, the following:

(2) Objective observation of changes in the patient's condition as a means of analyzing and determining the nursing care required and the need for further medical diagnosis and treatment;

(3) Special procedures contributing to rehabilitation;

(4) Administration of medication by any method ordered by a physician, such as hypodermically, rectally, or orally, including observation of the patient after receipt of the medication;

(5) Administering tube or syringe feedings or parenteral nutrition;

(6) Carrying out other treatments prescribed by the physician that involve a similar level of complexity and skill in administration.
(B) No class two facility shall admit or retain any resident in need of skilled nursing care unless the care will be provided on a part-time, intermittent basis; consisting of fewer than eight hours in a twenty-four hour day, or fewer than forty hours in a seven day period, and not more than a total of one hundred twenty days in any twelve-month period. The skilled nursing care must be provided by an appropriately licensed employee or contract employee of one or more of the following:...

(2) A hospice care program licensed under Chapter 3712. of the Revised Code.
(3) A mental health or substance use treatment provider, or board.
(C) In class two facilities, the facility shall monitor and report changes in the health status of residents that would require a change in facility type or referral for skilled nursing care or licensed health professional intervention and contact the resident's physician, source of medical care, or case manager with in twenty-four hours. When a resident is observed to have difficulty in self-administering medication, a new assessment of the resident's capacity to self-administer the medications prescribed for them with or without assistance must be obtained. If an updated...

(C) ...If an updated assessment determines that the resident is no longer capable of self-administering medication, the facility must provide a discharge or transfer notice to the resident in accordance with rule 5122-30-27 of the Administrative Code. An operator may not transfer such a resident to another class two residential facility.
(D) Class two facilities shall in the event of acute illness, accident, nursing facility admission, or hospitalization of a resident, contact the resident's physician or source of medical care immediately. The operator shall also notify any emergency contact pre-designated by the resident, and the resident's case manager, if applicable, as soon as possible, but not later than twenty-four hours after the emergency occurs. The operator shall document the occurrence and contacts in the resident's record.

(E) A resident in a class three facility may retain and utilize a visiting nurse, home health nurse or any other needed medical services.
5122-30-28
Medication

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5122-30-28 (A)

(A) Residential facilities may store medications at a separate licensed residential facility from the one in which the resident lives if the following conditions are met:
(1) The residential facility the items are stored at is licensed by the same operator;
(2) The medications are readily accessible;
(3) The resident receives the medication at the facility in which they live;
(4) Time sensitive medications are stored at the resident's facility;
(A) Residential facilities may store medications at a separate licensed residential facility from the one in which the resident lives if the following conditions are met:

(5) The items are not necessary in an emergency; and,

(6) Medications are stored in the central locked storage area of the storing residential facility and in the manner required by paragraph (E) of this rule.

(B) Staff of a residential facility shall not administer medication to the facility's residents, except in a class one residential facility.

Staff of class one and class two facilities may assist with the self-administration of medication as part of personal care services in accordance with this rule.
Staff shall assist with self administration or supervise the self administration of prescription medication only for whom the medication was prescribed and according to the prescribing physician's written instructions.

Staff shall keep as part of the resident record the self-administration of medication, including date, time, and dosage.

Staff, who have the training required in paragraph (B) of rule 5122-30-20 of the Administrative Code, may only perform any of the following in providing assistance with self-administration of medication:

(1) Remind a resident when to take medication and watch to ensure that the resident follows the directions on the container.
(2) Assist a resident in the self-administration of medication by taking the medication from the locked area where it is stored, in accordance with rules adopted pursuant to this section, and handing it to the resident. If the resident is physically unable to open the container, a staff member may open the container for the resident.

(3) Assist a physically impaired but mentally alert resident, such as a resident with arthritis, cerebral palsy, or Parkinson's disease, in removing oral or topical medication from containers and in consuming or applying the medication, upon request by or with the consent of the resident. If a resident is physically unable to place a dose of medicine to the resident's mouth without spilling it, a staff member may place the dose in a container and place the container to the mouth of the resident.
5122-30-28 (F)

(F) The facility shall provide a central locked storage area for resident medications, and shall store medications for residents needing assistance with self-administration. Residents who do not require assistance with self-administration of medication shall store medications in individual locked personal storage areas or in the facility central storage area, at the discretion of the resident.

(1) All medications centrally stored by the facility shall be clearly labeled with the resident's name, the name of the medication, and instructions for use.

5122-30-28 (F)

(F) The facility shall provide a central locked storage area for resident medications, and shall store medications for residents needing assistance with self-administration. Residents who do not require assistance with self-administration of medication shall store medications in individual locked personal storage areas or in the facility central storage area, at the discretion of the resident.

(2) The facility shall not remove and repackage medication from the pharmacy-dispensed container, nor permit any other repackaging of medication unless done by a nurse, doctor, or pharmacist who is not the resident's family member.
5122-30-28 (F) (continued)

(F) The facility shall provide a central locked storage area for resident medications, and shall store medications for residents needing assistance with self-administration. Residents who do not require assistance with self-administration of medication shall store medications in individual locked personal storage areas or in the facility central storage area, at the discretion of the resident.

(3) The residential facility shall develop and follow written procedures for the disposal of any prescribed medications that are no longer being used by the person for whom they were prescribed. This shall include that disposal of prescribed medications is verified and recorded by two staff members of an independent external entity. Records of medication destroyed by the facility shall be maintained for a minimum of three years or longer if required by law.

5122-30-28 (G)(H)(I)

(G) Medications that must be refrigerated shall be stored in a locked refrigerator or inside a refrigerator in a manner that prevents the removal of the medication from the refrigerator without a key or combination.

(H) Residence in the facility shall not be contingent upon taking medications.

(I) Nothing stated herein shall be construed to require or permit assistance in self-administration of medications to be imposed upon a resident capable of performing this activity without assistance.
5122-30-26
Provisions of Personal Care in Class One and Two Facilities

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5122-30-26 (A)

(A) The provisions of this rule are applicable to class one and two residential facilities which are required to provide personal care services. The provision of room and board shall be secondary or ancillary to the primary purpose of the facility to provide personal care, but the provision of room and board for an individual resident need not terminate in the event that personal care assistance is no longer needed by or is being provided for the individual resident. Additionally, the facility may admit a...
5122-30-26 (A)

(A) ... Additionally, the facility may admit a person not in need of personal care, but shall be required to be licensed as a class two facility if the facility provides personal care to at least one resident with mental illness or provides personal care to at least three residents, unless the facility is otherwise required to be licensed as a class one facility. The provision of personal care service to a child or adolescent shall also include the consent of the parent, guardian or custodian, as appropriate. Such...

5122-30-26 (A)

(A) ... Such personal care to a child or adolescent shall be age appropriate, and consistent with specified client rights requirements.

For the purposes of this rule, personal care services shall be considered to be provided by a facility if they are provided by a person employed by or associated with the facility or by another person pursuant to an agreement to which neither the resident who receives the services nor his or her sponsor is a party.
**5122-30-26 (B)**

(B) Personal care services include, but are not limited to, the following:

1. Assistance with walking and moving, dressing, grooming, toileting, oral hygiene, hair care, dressing, eating, and nail care.
2. Budgeting and teaching of money management skills.
3. Assistance with self-administration of medication in accordance with rule 5122-30-28 of the Administrative Code.

**5122-30-26 (B) (continued)**

(B) Personal care services include, but are not limited to, the following:

4. Preparation of special diets, other than complex therapeutic diets, for residents who require them, pursuant to the instructions of a physician or a licensed dietitian and in accordance with paragraph (B) of rule 5122-33-20 of the Administrative Code.
5122-30-26 (C)

(C) Personal care services:
(1) Personal care service, advice and assistance shall be provided to each resident in accordance with that resident's individual needs and preferences. The facility shall provide personal care services to residents who require those services and may provide personal care services to other residents upon request. The requirement to provide such personal care shall not be construed to require or permit the imposition of such activity, advice, or assistance on any matter in which the resident is able to perform the activity under his own direction.

5122-30-26 (C) (continued)

(C) Personal care services:
(2) Personal care service, advice, or assistance shall be provided in a manner and to an extent that supports individual stability, growth, privacy and personal dignity. No commentary or information about any resident's personal care skills or needs shall be communicated to any other persons without the permission of the resident.
5122-30-26 (D)

(D) If a resident requires certain personal care services that the facility does not offer, the facility either shall arrange for the services to be provided or shall transfer the resident to an appropriate setting within fourteen days of becoming aware of such a need. If the services are provided, they shall be at no extra cost to the resident and shall be paid for by the facility.

5122-30-26 (E)

(E) A resident in a class three facility may retain and utilize a visiting nurse, home health nurse or any other needed medical services.
5122-30-26 (F)

(F) The agreed-upon, specific personal care services to be performed by the facility for the individual resident shall be written in a personal care service plan developed by the facility within fourteen days of a resident's admission. A class one facility may develop a separate personal care service plan or may include the personal care services to be provided in the resident's individualized treatment plan.

5122-30-30
Social, Recreational and Leisure Activities

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5122-30-30 (A)

(A) Each class one and class two residential facility shall encourage residents to participate in social, recreational, and leisure activities.

5122-30-30 (B)

(B) Residents of class two facilities and class one facilities shall be encouraged to participate in community activities and social events. The facility staff shall demonstrate a reasonable effort to facilitate and support such involvement by providing at least one local daily newspaper or current community activity brochures and advertisements, and provide transportation or information about the accessibility of transportation.
5122-30-30 (C)

(C) Each class one and class two residential facility shall provide, at a minimum, all of the following: 
(1) Leisure time activities appropriate to the age and sex of the residents. Examples of leisure activities include crafts, books, magazines and games. 
(2) A residential care facility shall make available recreational equipment and activities sufficient to implement recreational programs to encourage physical activity. All recreational equipment necessary for the implementation of recreation programs shall be maintained in a safe and usable condition.

5122-30-30 (D)

(D) The staffing pattern of a class one and class two facility shall assure reasonable amounts of time for staff to engage in social and recreational activity with residents.
Where Can I Find All of the New Rules?

Where Can I Find All of the New Rules?
You must register individually for each webinar in which you intend to participate
MHAS Training Page Includes Webinar Information and recorded webinars
Live webinars are recorded for those who are unable to participate, and to utilize as a training and reference resource
Should webinar recording error occur, MHAS will record a webinar on same topic and post
Posted along with webinar handouts

Current Webinar Schedule (and link to registration) is available at:
http://mha.ohio.gov/Portals/0/assets/Regulation/LicensureAndCertification/LC-Communications/Residential-Rules-Webinar-Training-Schedule-Registration.pdf
## Final Three Webinars

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## Questions?

Note: For future questions, each facility has an assigned lead surveyor, who can also answer questions.

Reminder: November 14 Session is dedicated only for Q & A. This will provide an opportunity to answer new or previously unanswered questions.

If there is any question that is not answered during the webinar, or you think of later, you can submit them to me in advance of the webinar, or if you have not yet registered for the webinar, you can submit the questions during the webinar registration process.

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