



Ohio Administrative Code

Rule 5101:2-9-36 Additional requirements for children's crisis care facilities.

Effective: October 1, 2017

(A) As used in Chapters 5101:2-5 and 5101:2-9 of the Administrative Code, a "children's crisis care facility" means a facility that has as its primary purpose the provision of residential and other care to the children described in paragraph (A)(1) or (A)(2) of this rule:

(1) One or more pre-teens voluntarily placed in the facility by the pre-teen's parent or other caretaker who is facing a crisis that causes the parent or other caretaker to seek temporary care for the pre-teen and referral for support services;

(2) One or more pre-teens placed in the facility by a public children services agency (PCSA) or private child placing agency (PCPA) that has legal custody or permanent custody of the pre-teen and determines that an emergency situation exists necessitating the pre-teen's placement in the facility rather than an institution certified under section 5103.03 of the Revised Code or elsewhere.

(3) "Children's crisis care facility" does not include either of the following:

(a) Any organization, society, association, school, agency, child guidance center, detention or rehabilitation facility, or children's clinic licensed, regulated, approved, operated under the direction of, or otherwise certified by the department of alcohol and drug addiction services, the department of education, a local board of education, the department of youth services, the department of mental health, or the department of developmental disabilities;

(b) Any individual who provides care for only a single-family group, placed there by their parents or other relative having custody.

(B) "Pre-teen" means an individual under thirteen years of age.

(C) No certified children's crisis care facility shall do any of the following:



(1) Provide residential care to a pre-teen for more than one hundred twenty days in a calendar year;

(2) Subject to paragraph (C)(3) of this rule and except as provided in paragraph (D) of this rule, provide residential care to a pre-teen for more than sixty consecutive days;

(3) Except as provided in paragraph (E) of this rule, provide residential care to a pre-teen for more than seventy-two consecutive hours if a PCSA or PCPA placed the pre-teen in the facility;

(4) Fail to comply with section 2151.86 of the Revised Code.

(D) A certified children's crisis care facility may provide residential care to a pre-teen for up to ninety consecutive days, other than a pre-teen placed in the facility by a PCSA or PCPA, if any of the following are the case:

(1) The pre-teen's parent or other caretaker is enrolled in an alcohol and drug addiction service or a community mental health service certified under section 5119.36 of the Revised Code;

(2) The pre-teen's parent or other caretaker is an inpatient in a hospital;

(3) The pre-teen's parent or other caretaker is incarcerated;

(4) A physician has diagnosed the pre-teen's parent or other caretaker as medically incapacitated.

(E) A certified children's crisis care facility may provide residential care to a pre-teen placed in the facility by a PCSA or PCPA for more than seventy-two consecutive hours if the director of job and family services or the director's designee issues the agency a waiver of the seventy-two consecutive hour limitation. The waiver may authorize the certified children's crisis care facility to provide residential care to the pre-teen for up to fourteen consecutive days.

(F) The director of job and family services may suspend or revoke a children's crisis care facility's certificate pursuant to Chapter 119. of the Revised Code and in accordance with rule 5101:2-5-07 of the Administrative Code if the facility ceases to meet any provision of this rule or the facility's operator ceases to comply with any of the rules governing the certification of children's crisis care



facilities. A PCSA, PCPA or PNA operating a children's crisis care facility shall comply with all the requirements of Chapter 5101:2-5 of the Administrative Code as applicable to the type of the agency, depending on whether the agency is a PCSA, a PCPA, or a PNA. An agency operating a children's crisis care facility shall comply with all applicable requirements of the rules in Chapter 5101:2-9 of the Administrative Code for residential facilities, depending on whether the facility is a group home or a children's residential center, including those rules specified for a residential parenting facility. If there is a conflict between a requirement of any provision in this rule or any provision of Chapter 5101:2-5 of the Administrative Code or Chapter 5101:2-9 of the Administrative Code, the provisions of this rule shall take precedence.

(G) An agency operating a children's crisis care facility shall reasonably assure that child care staff persons are assigned to care for the same group of children each day and shall adhere to the following child care staff to children ratios:

(1) For children under the age of six years, including the children of child care staff, there shall be at least one child care staff person on duty during awake hours for every five children or fraction thereof.

(2) For children over the age of six years, including children of child care staff, there shall be at least one child care staff person on duty during awake hours for every six children or fraction thereof.

(3) For children ages zero to twelve, including the children of child care staff, there shall be at least one awake child care staff person on duty during sleeping hours for every eight children or fraction thereof.

(4) When a group of children includes children from more than one of the age groups listed in paragraph (G)(1), (G)(2) or (G)(3) of this rule, the staff to child ratio shall be determined according to the age of the youngest child within any group of children.

(5) There shall be at least two staff members on duty at all times when children are present in a crisis care facility.

(H) In place of a service plan and a case plan, a children's crisis care facility shall develop an



engagement plan for the individual or agency that placed the child. The engagement plan shall be completed no later than five business days after the child is placed and shall address at a minimum:

- (1) Steps that will be taken to resolve the issues that necessitated the placement.
- (2) Obligations and expectations of the individual or agency that placed the child while their child is placed at the facility.
- (3) Identification of any special care needs of the child that will need to be addressed while in placement.
- (4) Projected timeline for discharge.

(I) Comprehensive health care for a child admitted to a children's crisis care facility shall be in accordance with rules 5101:2-42-66.1 and 5101:2-42-66.2 of the Administrative Code. If there is a conflict between a requirement of any provision in this rule or any provision of rule 5101:2-42-66.1 or rule 5101:2-42-66.2 of the Administrative Code, the provisions of this rule shall take precedence.

(J) For the purpose of the management and prevention of communicable diseases, a children's crisis care facility shall adhere to the following procedures:

(1) A child with any of the following signs or symptoms of illness shall be immediately isolated from other children. The child, while isolated shall be carefully watched for symptoms listed in paragraph (J)(2) of this rule.

- (a) Unusual spots or rashes;
- (b) Sore throat or difficulty in swallowing;
- (c) Elevated temperature of one hundred degrees or above;
- (d) Vomiting;



(e) Evidence of lice, scabies or other parasitic infection.

(2) A child with any of the following signs or symptoms of illness shall be immediately isolated and medically assessed by a licensed physician or registered nurse.

(a) Diarrhea (more than one abnormally loose stool within a twenty-four hour period);

(b) Severe coughing, causing the child to become red or blue in the face or to make a whooping sound;

(c) Difficult or rapid breathing or wheezing;

(d) Yellowish skin or eyes;

(e) Conjunctivitis;

(f) Temperature of one hundred degrees Fahrenheit taken by the auxiliary method when in combination with any other sign of illness;

(g) Untreated infected skin patches;

(h) Unusually dark urine and/or grey or white stool;

(i) Stiff neck.

(3) A child isolated due to suspected communicable disease shall be:

(a) Cared for in a room or portion of a room not being used for other types of child care.

(b) Checked on every fifteen minutes and a notation made on an isolation log regarding the observation made.

(c) Made comfortable and provided with a bed. All linens and blankets used by the ill child shall be



laundered before being used by another child. After use, the bed shall be disinfected with an appropriate germicidal agent, or, if soiled with blood, feces, vomit or other body fluids, the bed shall be cleaned with soap and water and then disinfected with an appropriate germicidal agent.

(d) Observed carefully for worsening condition. If the condition has worsened, a physician shall be contacted.

(4) The universal blood and body fluid precautions according to the United States department of health and human services' centers for disease control and prevention (CDC) as reported at the following internet address: http://www.cdc.gov/ncidod/dhqp/bp_universal_precautions.html.

(5) A procedure for immediate notification of the person or agency holding custody of a child when the child is exhibiting signs or symptoms of illness or has been exposed to a communicable disease.

(6) The children's crisis care facility's procedures regarding the care of a mildly ill child. A "mildly ill child" is defined as one of the following:

(a) A child who is experiencing minor common cold symptoms, but who is not exhibiting any of the symptoms specified in paragraph (J)(1) or (J)(2) of this rule, or

(b) A child who does not feel well enough to participate in activities, but who is not exhibiting any of the symptoms specified in paragraph (J)(1) or (J)(2) of this rule.

(K) The children's crisis care facility shall keep the person who placed a child informed of health care provided to the child while residing in the facility on a weekly basis and at discharge.

(L) The children's crisis care facility shall adhere to the following handwashing procedures:

(1) All staff and volunteers shall wash their hands with soap and running water upon entering and when leaving the children's crisis care facility, after each diaper change, after assisting a child with toileting, after cleaning, after toileting, before preparing or eating food, before feeding any child, before and after administering medication, and after handling animals.



(2) Handwashing facilities shall be available within the area where children receive diaper or bathroom care.

(3) A handwashing facility is defined as a permanent-type fixture with running water.

(4) Children shall wash hands before and after eating.

(5) Disposable towels shall be available at the handwashing site at all times and shall be used to dry hands and turn off the water after handwashing.

(M) In addition to the diaper care procedures specified in rule 5101:2-9-05 of the Administrative Code, the following procedures shall be followed:

(1) No child's diaper shall be changed in the child's bed or crib;

(2) Each diaper changing area shall be disinfected after each diaper change with an appropriate germicidal agent. If the diaper changing area is soiled after the diaper change, it shall be cleaned with soap and water and then disinfected with an appropriate germicidal and virus killing agent.

(3) Disposable materials are recommended for diaper changing, and if used, shall be used once and discarded. If washcloths or other washable materials are used, they shall be used once and stored in an appropriate germicidal and virus killing solution until laundered.

(N) Each child admitted to a children's crisis care facility shall be provided with an opportunity to safely and comfortably sit, crawl, toddle, or walk and play according to the child's stage of development, under supervision and in a designated space apart from sleeping quarters each day in order to enhance development.

(1) Children of both genders and under twenty-four months in age who are not siblings may share the same bedroom.

(2) No children over twenty-four months of age and of different genders may share the same bedroom unless they are from the same sibling group.



(3) Siblings of differing genders are, at the discretion of the agency, allowed to share the same bedroom.

(4) All sleeping children shall be observed at least once per hour by agency staff.

(O) Each infant in care in a children's crisis care facility shall be removed from his/her crib for all feedings and removed from the crib at other intervals during each day for individual attention. For the purpose of feeding, all infants without the ability to sit up shall either be placed in an infant seat, or held by a child care worker, other adult over twenty-one years of age, or the child's parent, as appropriate to the child's age. No child shall be placed in a crib or bassinet for feeding and no bottle shall be propped to feed an infant. Infants with the ability to sit up may be placed in a high chair for feeding.

(P) Infant food shall be prepared and served in a manner appropriate to the developmental needs of each child according to the child's stage of development and in sufficient quantities to promote healthy growth and development.

(Q) There shall be at least one bathroom designated for use by children in a children's crisis care facility and it shall have at least one wash basin and one toilet accessible for small sized children.

(R) Each dining area in a children's crisis care facility shall be equipped with tables, chairs and eating utensils appropriate to the age, physical condition, and developmental stage of the children who will eat in the area.

(S) A children's crisis care facility shall plan and provide, for each child twelve months and older, an opportunity for an on-site safely accessible, supervised and developmentally appropriate outdoor activity each day in suitable weather if not contraindicated by the child's medical condition.

(1) All children shall be provided with appropriate outerwear and/or sunscreen as applicable to the weather conditions.

(2) The supervision of children by staff shall adhere to the required child/staff ratios specified in



paragraph (G) of this rule when the children are using the outdoor play area including going to and coming from the play area. No child shall be left unsupervised in the outdoor play area.

(3) When a group of children is outdoors, the child care staff person(s) responsible for the group shall be able to summon another adult without leaving the group alone or unsupervised.

(4) The play area shall be supervised so that all children are within the sight and hearing of the supervising child care staff person(s) at all times.

(5) The surface of the outdoor play area shall be drained well enough so that standing water does not prohibit the use of the play area on a daily basis.

(6) The play area shall be free of hazards such as, but not limited to, broken glass, potholes, garbage, flammable materials, and other debris.

(7) The play area shall be well defined by a fence, hedge, natural or other barrier to protect the area from traffic, animals, or other hazards.

(8) The outdoor play area shall provide at least sixty square feet of usable space per child using the play area at any one time, regardless of the number of children the children's crisis care facility is certified to serve.

(T) A children's crisis care facility shall be compliant with section 5103.132 of the Revised Code.