



Ohio Administrative Code

Rule 5122-26-06 Human resources management.

Effective: August 1, 2026

(A) As used in this rule:

- (1) "Individuals with disabilities" has the same meaning as in 34 U.S.C. 40104.
- (2) "Personnel" or "staff member" means any paid or unpaid person, volunteer, contract worker, student intern, or other person who is part of a provider's workforce, including those who perform management, clinical, operations, clerical, or other functions in support of the provider's mission, vision, and goals.
- (3) "Criminal records check" has the same meaning as in section 109.572 of the Revised Code.

(B) Human resources policies, procedures, and processes

A provider is to have human resources policies, procedures, and processes in place that ensure all of the following:

- (1) The development of competent, qualified clinical and non-clinical staff;
- (2) Appropriate and adequate supervision;
- (3) Continuing education; and
- (4) The maintenance of appropriate documentation.

(C) Job descriptions

A provider is to develop a job description for each position that includes all of the following:

- (1) The minimum qualifications for the position, including academic standards, competencies (i.e., knowledge, skills, and experience), and licenses, certifications, registrations, or other credentials such as those mandated by an Ohio professional licensing board or federal agency (i.e., the United States drug enforcement agency for prescribers); and
- (2) The duties and responsibilities of the position.

(D) Verification of licenses, certifications, registrations, or other credentials

Before employing or contracting with an individual, a provider is to verify that the individual possesses the necessary licenses, certifications, registrations, or other credentials for the position. The provider may accomplish this verification by making a copy of the individual's license, certification, registration, or other credential



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and noting the date and name of the individual who verified the credentials or printing or downloading a copy of the individual's license, certification, registration, or other credential record from a primary source, such as elicense Ohio professional licensure system, that shows the date the record was printed or downloaded and all of the following information regarding the individual:

- (1) The individual's name;
- (2) The individual's license number;
- (3) The name of the board or agency issuing the licenses, certifications, registrations, or other credentials;
- (4) The license type or name of the license;
- (5) The date the license was issued; and
- (6) The date that the license will expire.

(E) Criminal records checks

- (1) Before employing or contracting with an individual or, in the case of a volunteer or student intern, allowing the individual to have contact with individuals served, a provider is to obtain consent from the individual to conduct a criminal records check of the individual. Once consent is received, the provider is to request that the superintendent of the bureau of criminal investigation, or a vendor approved by the bureau, conduct a criminal records check of the individual. Additionally, the provider is to request that the criminal records check conducted by the superintendent or the superintendent's approved vendor include information from the federal bureau of investigation in the criminal records check if the provider offers certifiable services or supports to individuals under eighteen years of age or individuals with disabilities under twenty-one years of age.
- (2) A criminal records check of an individual, as described in this paragraph, is to be repeated every four years if the individual offers certifiable services or supports to individuals under eighteen years of age or individuals with disabilities under twenty-one years of age.
- (3) A provider that is mandated to request information from the federal bureau of investigation as part of a criminal records check, as described in paragraph (E) (1) of this rule, may apply to the bureau of criminal investigation to become an approved recipient of national criminal history record information through the volunteer and employee criminal history system (VECHS) program. Information on the VECHS program, and an application for the program, is available



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at <https://www.ohioattorneygeneral.gov/Files/Forms/Forms-for-BCI-Criminal-Records-and-Background-Chec/Quality-Assurance/VECHS-information-04-12-23>.

(F) Services or supports to individuals under twenty-one years of age

A provider that offers certifiable services or supports to anyone under twenty-one years of age is to ensure both of the following, in addition to conducting a criminal records check in accordance with paragraph (E) of this rule:

- (1) That each employee, contractor, volunteer, or student intern utilized in a position responsible for the direct care or supervision of anyone under twenty-one years of age is at least eighteen years of age; and
- (2) That each employee, contractor, volunteer, or student intern, regardless of whether that individual is in a position responsible for direct care or supervision, has not pleaded guilty to nor been convicted of any offense specified in appendix B to rule 5180:2-5-09.1 of the Administrative Code except that such an individual who has been convicted of or pleaded guilty to such an offense may be an employee, contractor, volunteer, or student intern if both of the following are the case:
 - (a) The offense involved is not a non-rehabilitation offense as specified in appendix B to rule 5180:2-5-09.1 of the Administrative Code; and
 - (b) The provider has determined and documented that the rehabilitative criteria in appendix D to rule 5180:2-5-09.1 of the Administrative Code have been satisfied.

(G) Orientation training

A provider is to provide orientation training to staff and document the completion of such training not later than thirty calendar days after the first date of employment or having contact with individuals served. At a minimum, the orientation training is to include all of the following topics:

- (1) Employee and client safety;
- (2) The provider's mission, vision, and goals;
- (3) The characteristics of the populations served;
- (4) Sensitivity to cultural diversity;



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- (5) Policies and procedures specific to job duties and responsibilities;
- (6) Confidentiality, including the responsibilities under the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and, if applicable, 42 C.F.R. part 2;
- (7) Reporting abuse and neglect policies and procedures; and
- (8) Client rights and grievance policies and procedures.

(H) Scope of practice and supervision

- (1) All personnel for whom a state or federal license, certification, registration, or other credential is mandated by law or regulation is to maintain the current license, certification, registration, or other credential issued by the appropriate Ohio or federal agency and is to practice only within the scope of that license, certification, registration, or other credential.
- (2) Certifiable services or supports requiring supervision in accordance with Chapter 5122-29 of the Administrative Code are to be under the supervision of an individual who:
 - (a) Is eligible to supervise services or supports as set forth in rule 5122-29-30 of the Administrative Code; and
 - (b) Has a scope of practice in the area they are supervising as determined by the board that issues their professional license, certificate, or registration.
- (3) Each non-supervisory staff member providing direct services or supports is to receive supervision in accordance with the mandates of the Ohio professional licensing board that issued the individual's license, certificate, or registration or, in the absence of such mandates, at regularly scheduled intervals appropriate to the staff member's skill level, experience, and job duties. Each occasion of supervision is to be formally documented by the supervisor of the non-supervisory staff member and maintained in the non-supervisory staff member's supervision record.

Supervision may be provided in individual and group sessions, including supervisor participation in treatment plan meetings.

(I) Continuing education



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- (1) A provider is to ensure direct service and supervisory staff participate in continuing education. To that end, each staff member is to complete the following, as applicable:
 - (a) If the staff member provides or supervises certifiable services or supports for which a license, certificate, or registration from an Ohio professional licensing board is necessary, at least the minimum number of continuing education hours prescribed by that board for each license, certificate, or registration renewal cycle.
 - (b) If the staff member provides or supervises services or supports that do not necessitate a license, certificate, or registration from an Ohio professional licensing board, at least twenty hours of continuing education every two years based on the individual's date of hire. If the staff member was originally hired in a position in which the staff member was not mandated to complete continuing education, but was later hired in such a position, the first twenty hours of continuing education are to be completed within two years of the first date of work in the new position. A staff member employed as of the effective date of this rule providing or supervising services or supports for which no license, certificate, or registration is issued by an Ohio professional licensing board is to complete the mandated continuing education within three years of the effective date of this rule, and every two years thereafter, based on the hire date or first date of work in the new position, as applicable.
- (2) Continuing education is to maintain or increase competency, include topics specific to populations served, and include instruction to achieve cultural competence.

(J) Performance evaluation

A provider is to evaluate each staff member's performance at the frequency mandated by its national accrediting organization, if applicable, or, if for a provider without national accreditation, annually.

(K) Personnel files

A provider is to maintain a personnel file for each staff member. Personnel files are to be stored in such a manner as to maintain the privacy of each staff member. Provider policies are to describe who is to have access to the various information in the file. Each staff member is to have access to their own personnel file.



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- (1) With respect to each staff member, personnel files are to include all of the following:
 - (a) Identifying information.
 - (b) If the staff member possesses a license, certification, registration, or other credential from an Ohio professional licensing board or federal agency to perform certifiable services or supports or supervise certifiable services or supports, either an electronic verification or hard copy of that item. Alternatively, if the staff member does not need such an item to provide direct services or supports or supervise services or supports, documentation verifying that the staff member has achieved competency. Each provider is to establish the documentation necessary to verify competency in their personnel policies and procedures.
 - (c) A position title and description or, if the staff member is contract staff, a copy of the contract containing the staff member's title, duties, expectations, and necessary qualifications.
 - (d) Documentation that the staff member completed orientation training, including documentation that the staff member received a copy of the policies and procedures specified in paragraph (G) of this rule.
 - (e) Any disciplinary actions brought against the staff member.
 - (f) The results of each criminal records check conducted in accordance with paragraph (E) of this rule.
 - (g) Only if the staff member works for a provider that provides services subject to 42 C.F.R. part 2, documentation that the employee has reviewed and agreed to comply with those federal regulations.
 - (h) Positions supervised by the staff member, if applicable.
 - (i) Compensation documentation, if applicable.
- (2) In addition, with respect to each staff member, except for student interns and volunteers, personnel files are to include all of the following:
 - (a) The staff member's resume or application for employment, except that the provider's executive director, chief executive officer, president, or owner is exempted from this provision;
 - (b) Verification of references, if mandated for the position;



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- (c) The staff member's performance evaluations; and
 - (d) Documentation of continuing education and training in accordance with paragraph (l) of this rule for staff members that provide direct services or supports or supervise services or supports.
- (L) A provider is to develop written human resources management policies and procedures that do all of the following:
- (1) Forbid discrimination in employment, training, job duties, compensation, evaluation, promotion, and any other term or condition of employment based on race, ethnicity, age, color, religion, sex, national origin, sexual orientation, gender identity, physical or mental disability, developmental disability, genetic information, human immunodeficiency virus status, or any other factor disallowed by local, state, or federal law, and describe how the provider will monitor compliance with this standard and investigate complaints concerning violations of this standard.
 - (2) Describe a formal process for receiving employee grievances and investigating those grievances.
 - (3) Forbid sexual harassment.
 - (4) Establish code of conduct standards for all employees.
 - (5) Describe the grounds for termination of employment.
 - (6) Specify responsibilities concerning staff member access to, and disclosure of, an individual client's records, treatment information, diagnosis, and other protected health information. That policy is to be consistent with federal and state laws and regulations, including the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and, if applicable to the services and supports, 42 C.F.R. part 2.
 - (7) Establish a procedure for handling allegations of staff neglect or abuse of individuals served and the internal and external reporting that is to occur associated to responding to such allegations.
 - (8) Acknowledge the written client rights policy and written client grievance procedure specified in rule 5122-26-18 of the Administrative Code.
 - (9) Establish a disciplinary policy that specifies the actions that will be taken when there is employee misconduct or if the employee receives a criminal conviction that bears a direct and substantial relationship to that employee's position.



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- (10) Specify how employees will be notified of changes in the human resources policies and procedures described in this paragraph.
- (M) A copy of the human resources policies and procedures described in paragraph (L) of this rule is to be given to each employee and each employee is to be notified when changes are made to those policies and procedures. The copy and any change notification may be given electronically. A provider is to make a notation in the staff member's personnel file when the staff member receives the copy or change notification.