Ohio Administrative Code

Rule 5122-26-12 Environment of care and safety.

Effective: August 1, 2026

(A) The purpose of this rule is to ensure that each provider maintains a clean, safe, and therapeutic environment to support the provision of certifiable services and supports and minimize the risk of harm to clients, visitors, and others.

(B) A provider is to designate the personnel who are responsible for implementing and overseeing the provisions of this rule. The personnel may be designated as an individual, position, or committee.

(C) A provider is to develop a written emergency preparedness plan that is consistent with guidance from the United States department of homeland security's website pertaining to business emergency plans, available at https://www.ready.gov/business/emergency-plans, and that same agency's website on active shooter situations: https://www.dhs.gov/xlibrary/assets/active_shooter_booklet.pdf. The plan is to address various types of emergency situations including fires, bomb threats, natural disasters, utility outages or malfunctions (e.g., gas leaks), active shooter situations, and other potential threats based on location (e.g., nuclear power plant leak). In addition, the plan is to address all of the following:

(1) Who is to provide initial and ongoing training on how to properly respond to the various types of emergency situations, the staff or positions to receive training, and the frequency of the on-going training. Regarding training, the plan is to specify all of the following:

(a) That initial training is to be completed and documented not later than thirty calendar days after the first date of employment or having contact with individuals served.

(b) That ongoing training is to be completed whenever there is a change in the emergency preparedness plan.

(c) That each training session that an employee attends is to be documented in the employee's personnel record.

(2) Where evacuation plans are to be posted and the frequency for updating them.

(3) The procedure for conducting emergency drills and how the effectiveness of such drills will be evaluated.

(a) With respect to fire drills, all of the following are the case:

(i) For provider locations offering services on a less than twenty-four hours a day basis, fire drills are to be conducted at least once every twelve months.

(ii) For residential and withdrawal management substance use disorder service providers, fire drills are to be conducted at least quarterly.

A driver intervention program is exempt from this subparagraph unless other services or programs are also available at the location.

(b) With respect to tornado drills, such drills are to be conducted at least annually.

(D) A provider is to develop written policies and procedures to address all of the following:

(1) Safe handling, storage, and disposal of hazardous materials;

(2) Safe handling and disposal of infectious waste materials, which are to include applicable specifications of the occupational safety and health administration within the United States department of labor and Ohio department of health;

(3) Infection control, which is to include applicable specifications of the occupational safety and health administration within the United States department of labor and Ohio department of health;

(4) The placement of carbon monoxide detectors and a ban on the use of unvented kerosene, gas, or oil heaters; and

(5) Hazardous areas on the premises of, or adjacent to, the provider's building or other structure (e.g., ponds, cliffs, etc.).

(E) A provider is to meet local, state, and federal laws regarding accessibility. If a provider identifies a structural or other barrier that limits access to a building or structure or access within the building or structure, the provider is to develop a plan for removing the barrier.

(F) A provider is to conduct regular walk-through and visual safety inspections at least every six months or more often as identified by the provider's policies and procedures or its national accrediting organization. The provider is to keep documentation regarding when these inspections occurred. Inspections are to include attention to all of the following:

(1) Physical structure;

(2) Electrical systems;

(3) Heating and cooling systems;

(4) Warning devices (e.g., exit lights, alarm systems, etc.);

(5) Fire and carbon monoxide detection systems;

(6) Fire suppression equipment;

(7) Lighting;

(8) Food preparation areas, if applicable; and

(9) Any other areas or systems as needed and identified in provider policies and procedures.

Driver intervention programs provided at motels, hotels, or camps are exempt from the mandate in this paragraph.

(G) A provider is to obtain permits and associated inspections in accordance with local, state, and federal laws.

Driver intervention programs provided at motels, hotels, or camps are exempt from the mandate in this paragraph.

(1) A provider is to pass both of the following types of inspections at least once every twelve months:

(a) A fire inspection, including testing of fire alarms, conducted by a certified fire authority or, where one is not available, a fire inspection conducted by the division of the state fire marshal in the department of commerce.

(b) A water supply and sewage disposal inspection for facilities in which these systems are not connected with public services, for the purpose of certifying compliance with rules adopted by the Ohio department of health and any other state or local regulations, rules, codes, or ordinances.

(2) A provider is to pass all of the following inspections, as applicable, in accordance with the schedule prescribed by local or state law:

(a) An elevator inspection;

(b) A boiler inspection;

(c) A food service inspection;

(d) A swimming pool inspection; and

(e) Any other inspection mandated by local, state, or federal law.

(H) With respect to a client in need of a specialized diet, a provider is to maintain written documentation that the planning and preparation of meals is done in accordance with a plan and instructions issued by a physician or dietitian licensed by the state medical board of Ohio.

(I) A provider is to have equipment, including furnishings and records systems, that are in good and safe repair and suitable to the certifiable services and supports being provided by the provider.