

From the Desk of: Superintendent Megan K. Manuel

"News From Last Night" is published and distributed to each staff member following each Board Meeting.

Warren County Board of Developmental Disabilities Regular Board Meeting

August 25, 2025

The Warren County Board of Developmental Disabilities met for its regular monthly meeting at 6:00 p.m. at the Administrative Offices, 42 Kings Way, Lebanon, Ohio 45036.

- Approval of the regular Board meeting minutes for June 23, 2025.
- The following resolutions were approved:

25-08-01	The Warren County Board Of Developmental Disabilities Authorizes The Superintendent To Sign The Amendment for Driving Assessment (DA), Permit Tutoring, First Time Driver's Safety Course, Driving Instruction, Driver Education Class With Capabilities, LLC.
25-08-02	The Warren County Board Of Developmental Disabilities Authorizes The Superintendent To Sign The Short-Term Admission Agreement With Southwest Ohio Developmental Center.
25-08-03	The Warren County Board Of Developmental Disabilities Authorizes The Superintendent To Sign The Short-Term Admission Agreement With Mount Vernon Developmental Center.
25-08-04	The Warren County Board Of Developmental Disabilities Authorizes The Superintendent To Sign The Short-Term Admission Agreement With Cambridge Developmental Center.
25-08-05	The Warren County Board Of Developmental Disabilities Authorizes The Superintendent To Sign The Short-Term Admission Agreement With Gallipolis Developmental Center.
25-08-06	Approval of 2025 Wellness Incentive Program.
25-08-07	Approval Of Agency Policy Revisions.

Meeting adjourned at 6:40 p.m.

•	The next regular monthly meeting will be held September 22, 2025, at 6:00 p.m. at the Administrative Offices, Lebanon, Ohio.



WARREN COUNTY BOARD OF DEVELOPMENTAL DISABILITIES BOARD RESOLUTION

Resolution Number: 25-08-07	Date of Resolution: 08-25-2025	

Topic of Resolution: Approval Of Agency Policy Revisions.

RESOLUTION

Whereas, the Warren County Board of Developmental Disabilities has written, reviewed and updated the following policies to meet federal and state guidelines as follows:

Effective August 26, 2025

New		None
Revised	3.06	Residential Services Policy
	3.07	Waiting List
		Development and Implementation of behavioral
	3.08	support strategies
	3.09	Photographing Individuals
	4.C.10	Insurances
	4.D.08	Holidays and Supplemental Leave
	4.D.09	Sick Leave and Sick Leave Conversion
	4.F.02	Dress Code
Reviewed (no changes)	1.03	Addressing the Board
	1.09	Tobacco Free Campus
	1.10	Firearms
	1.11	Right to Search-Inspect
	4.A.07	Nepotism
	4.A.08	Investigations-Criminal Background Checks
	4.A.09	Whistle Blower Protections
	4.B.11	Alcohol and Drug Free Workplace
	4.B.12	Political Activity
Proposed for Deletion	4.D.10	Sick Leave Conversion

THEREFORE, BE IT RESOLVED, that the Warren County Board of Developmental Disabilities approves the above listed policies effective as stated.

Number of Board Members Present	Abstentions	
	In Favor	
	Opposed	



Residential Services Policy, 3.06

A. Residential Services:

The Warren County Board of Developmental Disabilities (WCBDD) is committed to the establishment of residential living arrangements, which are consistent with the principles of self-determination and community integration. Furthermore, ensuring that individuals receive services in the most integrated setting appropriate to their needs. There are a variety of residential options currently existing in Warren County to meet individuals' level of care. These options include community housing options with services funded by the Individual Options Waiver, Level One Waiver, WCBDD Local Funds, or SELF Waiver. These homes may be Community Housing Assistance Program (CHAP) Homes, privately owned rentals, or family—owned homes. Other options include Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFID), Residential Facilities licensed by the Ohio Department of Developmental Disabilities, nursing facilities, other shared living options, and residential facilities that are not licensed by the Ohio Department of Developmental Disabilities.

Warren County residents will be given priority for residential living options over those not residing in Warren County. Individuals requesting residential supports are assessed to determine needs and levels of service appropriate to meet those needs. Referrals are made for appropriate services based upon the needs of the individual. ICFIDs maintain their own waiting lists and work with WCBDD to fill openings.

B. Home and Community-Based Services:

The purpose of Home and Community-Based services is to support full community participation and achievement of individual-specific outcomes. An individual receiving services home and community-based services shallwill have opportunities to access age-appropriate activities, engage in meaningful employment and non-work activities, and pursue activities with people of the individual's choice and in settings not created exclusively for individuals with disabilities.

The Service Coordinator shallwill provide the individual with a description of all services and service setting options available through the waiver in which the individual is enrolled. Each individual shallwill be afforded the opportunity to choose among services or a combination of services and settings that address the individual's assessed needs in the least restrictive manner, promote the individual's autonomy, and minimize the individual's dependency on paid support staff. Services and service setting options (such as technology-based supports, intermittent or drop-in staffing, shared living arrangements, and integrated employment services) with potential to enable the individual to live and work in non-congregate settings shallwill be explored in accordance with the individual's assessed needs, before congregate settings are considered to enable the individual to live and work in a setting which promotes access to and participation in the broader community.

The Each individual shall will receive home and community-based services that:

- 1. Are appropriate to meet the individual's assessed needs and desired outcomes identified in the Individual Service Plan;
- 2. Supplement and not supplant existing natural supports;
- 3. Support the individual in the least restrictive and most cost-effective a cost-effective and in the least restrictive manner available; and
- 4. Are not otherwise available through other resources, including:
 - a. Unpaid supports;
 - b. Private insurance;
 - c. Community resources;
 - d. Special education or related services as defined in section 602 of the Individuals with Disabilities Education Improvement Act of 2004, 20 U.S.C. 1401.
 - e. Vocational rehabilitation services funded under section 110 of the Rehabilitation Act of 1973, 29 U.S.C. 730.
 - f. Medicare; or
 - g. Ohio The Medicaid State Plan

* **

Warren County Board of DD Personnel Policy

Residential Services Policy, 3.06

Home and Community-Based Services funds shallwill not be used to provide modifications to the physical structure of a residential facility unless the modifications are necessary to meet the needs of an established resident of the residential facility or the modifications are portable and clearly identified as the property of the individual. Except for the provision of short-term respite services as approved by the Centers for Medicare and Medicaid services, Home and Community Based Services shall not be provided in:

- 1. Hospitals;
- 2. Institutions for mental diseases;
- 3. Intermediate Care Facilities for Individuals with Intellectual Disabilities;
- 4. Nursing facilities; or
- 5. Other locations that have been determined by the Secretary of the United States Department of Health and
- Human Services or DODD as having the qualities of an institution and the effect of isolating individuals from the broader community.

C. Settings presumed unsuitable for home and community-based services

- 1. Home and community-based services will not be provided in provider-owned residential settings that do not meet an exception set forth in paragraph (B)(15) of the Administrative Code 5123-9-02.
- 2. Except for the provision of short-term respite services as approved by the centers for Medicare and Medicaid services, home and community-based services will not be provided in:
 - a. Hospitals, except when:
 - i. Homemaker/personal care is provided to an individual in acute care hospital in accordance with rule 5123-9-30 of the Administrative Code;
 - ii. Participant-directed homemaker/personal care is provided to an individual in an acute care hospital in accordance with rule 5123-9-32 of the Administrative Code; or
 - iii. Shared living is provided to an individual in an acute care hospital in accordance with rule 5123-9-32 of the Administrative Code;
 - b. Institutions for mental diseases;
 - c. Intermediate care facilities for individuals with intellectual disabilities;
 - d. Nursing facilities; or
 - e. Other locations that have been determined by the secretary of the United States department of health and human services or the department as having the qualities of an institution and the effect of isolating individuals from the broader community.

Absent a determination by the Centers for Medicare and Medicaid services that the settings are suitable, home and community-based services shallwill not be provided in:

- 1. Settings located in a building that is a publicly-operated or privately-operated facility that also provides inpatient institutional treatment; or
- 2. Settings located in a building on the grounds of or immediately adjacent to a publicly-operated facility that provides inpatient institutional treatment

ED. <u>Inquiries about Residential Services:</u>

Ohio Revised Code 5126.01(R) defines "Residential services" as services to individuals with developmental disabilities to provide housing, food, clothing, habilitation, staff support, and related support services necessary for the health, safety, and welfare of the individuals and the advancement of their quality of life.

WCBDD shall inform any individual who inquires about residential services about the different programs offered as residential services, including ICFIDs and Home and Community-Based Services. There are several instances when it would be appropriate for WCBDD personnel to communicate this information. This may happen when the individual and family first contact WCBDD for assistance. This may happen as part of a conversation during the

Warren County Board of

Warren County Board of DD Personnel Policy

Residential Services Policy, 3.06

Waiting List Assessment. This may happen when an individual's or family's circumstances change such that they are thinking of new residential options.

In any case, individuals and families do not have to use specific phrases to receive information about residential services. Instead, WCBDD shall provide this information when an individual and/or their guardian or family member:

- 1. Specifically asks about residential services;
- 2. States that they want to move;
- 3. Inquires about alternative places to live; or
- 4. Describes circumstances, through conversations, interviews, or various assessments, that indicate residential services should be considered and discussed.

When general inquiries are made regarding residential services, WCBDD shall:

- 1. Provide the individual or family member with a copy of a pamphlet developed by DODD, Residential Options Counseling Pamphlet. This pamphlet explains both ICF services and HCBS waiver services.
- 2. Assist the individual in accessing the vacancy registry.
- 3. If an individual or family member expresses interest in ICFID services, WCBDD shall provide contact information for all ICFIDs in Warren County and contiguous counties.

WCBDD personnel shall document compliance with this Policy in Targeted Case Management notes.



Waiting List, 3.07

A. Purpose

This policy sets forth requirements for the waiting list established pursuant to section 5126.042 of the Ohio Revised Code when the Warren County Board of Developmental Disabilities (WCBDD) determines that available resources are insufficient to enroll individuals who are assessed to need and who choose home and community-based services in Ohio Department of Developmental Disabilities (ODODD)-administered home and community-based services waivers.

B. Definitions

- 1. "Adult" means an individual who is eighteen years of age or older.
- 2. "Alternative services" means the various programs, funding mechanisms, services, and supports, other than home and community-based services, that exist as part of the developmental disabilities service system and other service systems. "Alternative services" include, but are not limited to, services offered through Ohio's Medicaid state plan such as home health services and services available at an intermediate care facility for individuals with intellectual disabilities.
- 3. "Community-based alternative services" means alternative services that are available and likely to meet an individual's needs in a setting other than a hospital, an intermediate care facility for individuals with intellectual disabilities, or a nursing facility. "Community-based alternative services" includes, but is not limited to, services provided through a community mental health agency or a public children services agency or services arranged by a county family and children first council described in section 121.37 of the Revised Code.
- 4. "Current need" means an unmet need for home and community-based services within twelve months, as determined by the WCBDD based upon assessment of the individual using the waiting list assessment tool. Situations that give rise to current need include:
 - a. An individual is likely to be at risk of substantial harm due to:
 - 1. The primary caregiver's declining or chronic physical or psychiatric condition that significantly limits the primary caregiver's ability to care for the individual;
 - 2. Insufficient availability of caregivers to provide necessary supports to the individual; or
 - 3. The individual's declining skills resulting from a lack of supports.
 - b. An individual has an ongoing need for limited or intermittent supports to address behavioral, physical care, or medical needs, in order to sustain existing caregivers and maintain the viability of the individual's current living arrangement because the individual requires more care than typically required for someone without developmental disabilities of the same age. This may include supports needed to supplement care provided by other caregivers for an individual in the custody of a public children services agency.
 - c. An individual has an ongoing need for continuous supports to address significant behavioral, physical care, or medical needs.
 - d. An individual is aging out of or being emancipated from children's services and has needs that cannot be addressed through community- based alternative services.
 - e. An individual requires waiver funding for adult day services or employment-related supports that are not otherwise available as vocational rehabilitation services funded under section 110 of the Rehabilitation Act of 1973, 29 U.S.C. 730, as in effect on the effective date of ORC 5126.042, or as special education or related services as those terms are defined in section 602 of the Individuals with Disabilities Education Improvement Act of 2004, 20 U.S.C. 1401, as in effect on the effective date of OAC 5123-9-04.
 - e.f. An individual is living in an intermediate care facility for individuals with intellectual disabilities or a nursing facility and has requested assistance to move from the facility to a community setting.



Waiting List, 3.07

- 5. "Date of request" means the earliest date and time of any written or otherwise documented request for home and community-based services made prior to the effective date of ORC 5126.042.
- 5. "Department" means Ohio department of developmental disabilities.
- 6. "Home and community-based services" has the same meaning as in section 5123.01 of the Ohio Revised Code.

6.

- 7. "Immediate need" means a situation that creates a risk of substantial harm to an individual, caregiver, or another person if action is not taken within thirty calendar days to reduce the risk. Situations that give rise to immediate need include:
 - A resident of an intermediate care facility for individuals with intellectual disabilities has received notice of termination of services in accordance with rule 5123-3-05 of the Ohio Administrative Code.
 - b. A resident of a nursing facility has received thirty-day notice of intent to discharge in accordance with Chapter 5160-3 of the Ohio Administrative Code.
 - c. A resident of a nursing facility has received an adverse determination in accordance with rule 5123-14-01 of the Ohio Administrative Code.
 - d. An adult is losing a primary caregiver due to the primary caregiver's declining or chronic physical or psychiatric condition or due to other unforeseen circumstances (such as military deployment or incarceration) that significantly limit the primary caregiver's ability to care for the individual when:
 - 1. Impending loss of the caregiver creates a risk of substantial harm to the individual; and
 - 2. There are no other caregivers available to provide necessary supports to the individual.
 - e. An individual is engaging in documented behavior that creates a risk of substantial harm to the individual, caregiver, or another person.
 - f. There is impending risk of substantial harm to the individual or caregiver as a result of:
 - 1. The individual's significant care needs (i.e., bathing, lifting, high-demand, or twenty-four-hour care); or
 - 2. The individual's significant or life-threatening medical needs.
 - g. An<u>There is reason to believe an</u> adult has been subjected to abuse, neglect, or exploitation and requires additional supports to reduce a risk of substantial harm to the individual.
- 8. "Individual" means a person with a developmental disability.
- 9. "Intermediate care facility for individuals with intellectual disabilities" has the same meaning as in section 5124.01 of the Ohio Revised Code.
- 10. "Locally-funded home and community-based services waiver" means the WCBDD pays the entire nonfederal share of Medicaid expenditures in accordance with sections 5126.059 and 5126.0510 of the Ohio Revised Code.
- 11. "Nursing facility" has the same meaning as in section 5165.01 of the Ohio Revised Code.
- 12. "Service and support administration" means the duties performed by a service and support administrator pursuant to section 5126.15 of the Ohio Revised Code.
- 13. "State-funded home and community-based services waiver" means ODODD pays, in whole or in part, the nonfederal share of Medicaid expenditures associated with an individual's enrollment in the waiver
- 14. "Status date" means the date on which the individual is determined to have a current need based on completion of an assessment of the individual using the waiting list assessment tool.
 - 15. "Transitional list of individuals waiting for home and community based services" means the list maintained in the ODODD's web-based individual data system which includes the name and date of request for each individual on a list of individuals waiting for home and community-based services on the day



Waiting List, 3.07

immediately prior to the effective date of ORC 5126.042 established in accordance with rule 5123:2-1-08 of the Ohio Administrative Code as that rule existed on the day immediately prior to the effective date of ORC 5126.042.

- "Waiting list assessment tool" means the Ohio assessment for immediate need and current need contained in the appendix to OAC 5123-9-04a component of the waiting list management system, which will be used for purposes of making a determination of an individual's eligibility to be added to the waiting list for home and community-based services defined in paragraph (B)(20) of ORC 5126.042 and administered by persons who successfully complete training developed by the ODODD.
- 17.—"Waiting list date" means, as applicable, either:
- a. The date of request for an individual whose name is included on the transitional list of individuals waiting for home and community-based services; or
 - b.a. The earliest status date for an individual whose name is not included on the transitional list of individuals waiting for home and community-based services.
 - 18.16. "Waiting list for home and community-based services" means the list established by WCBDD and maintained in the ODODD's web-based waiting list management system which includes the name, status date, date of request (as applicable), waiting list date, and the and criteria for current need by which an individual is eligible based on administration of the waiting list assessment tool, for each individual determined to have a current need, on or after the effective date of this rule.
- C. Planning for locally-funded home and community-based services waivers The WCBDD will, in conjunction with the development of its plan described in section 5126.054 of the Ohio Revised Code and its strategic plan described in rule 5123-4-01 of the Ohio Administrative Code, identify how many individuals the WCBDD plans to enroll in each type of locally-funded home and community-based services waiver during each calendar year, based on projected funds available to the WCBDD to pay the nonfederal share of Medicaid expenditures and the assessed needs of the county's residents on the waiting list for home and community-based services. This information will be made available to any interested person upon request.
- D. (D) Administration of the waiting list assessment tool
 - 1. The WCBDD will administer the initial waiting list assessment tool to an individual when the individual, the individual's guardian, or a member of the individual's family:
 - a. Requests the WCBDD administer the waiting list assessment tool;
 - b. Requests the individual be enrolled in a home and community-based services waiver or placed on the waiting list for home and community based services; or
 - c. Identifies an unmet need.
 - The WCBDD will re-administer the waiting list assessment tool to an individual when the individual, the individual's guardian, or a member of the individual's family identifies a change in circumstance that may result in the individual having a current need or an immediate need.
 - 3. When cause for administering the waiting list assessment tool is identified in accordance with paragraph (D)(1) or (D)(2) of this policy, the WCBDD will:
 - a. Explain to the individual, the individual's guardian (which may include a public children services agency), or the individual's family member, as applicable, the waiting list assessment tool process and timeframes set forth in rule 5123-9-04.
 - b. Identify services available to meet the individual's needs while the waiting list assessment tool is being completed.
 - c. AssessUse the waiting list management system to access the individual usingby administering the waiting list assessment tool.



Waiting List, 3.07

- 1. The waiting list assessment tool will be initiated by conducting an interview with the individual and the individual's guardian, as applicable, within fifteen calendar days of the date that cause for administering the waiting list assessment tool is identified in accordance with paragraph (D)(1) or (D)(2) of this policy. The WCBDD will document extenuating circumstances related to the individual that delay conduct of the interview.
- 2. The waiting list assessment tool will be completed <u>and approved</u> within forty-five calendar days of the date the interview with the individual and/or the individual's guardian is conducted in accordance with paragraph (D)(3)(c)(i) of this policy. The WCBDD will document extenuating circumstances related to the individual that delay completion of the waiting list assessment tool.
- 4. The WCBDD will notify the individual or the individual's guardian, as applicable, <u>in writing</u> of the outcome of administration of the waiting list assessment tool within ten calendar days of completion <u>and approval</u>.
 - a. The notice will include a copy of the individual's completed waiting list assessment tool and an explanation of the individual's/guardian's due process rights in accordance with paragraph (J) of this policy.
 - b. When the WCBDD determines the individual does not require waiver enrollment or placement on the waiting list for home and community-based services because community-based alternative services are available to meet the individual's assessed needs, the notice will include:
 - 1. A list of the individual's assessed needs.
 - 2. Specific community-based alternative services that address each assessed need.
 - 3. The date by which the WCBDD will follow-up with the individual/guardian to determine if the suggested community-based alternative services have been accessed.
 - 4. Contact information for a person at the WCBDD who can assist in identifying and accessing community-based alternative services including the person's name, title, telephone number, and electronic mail address.
- E. Waiting list for home and community-based services
 - 1. The WCBDD will place an individual's name on the waiting list for home and community-based services when, based on assessment of the individual using the waiting list assessment tool, the individual:
 - a. Has been determined to have a condition diagnosed with a severe, chronic disability that is:
 - 1. Attributable to a mental or physical impairment or combination of mental and physical impairments, other than an impairment caused solely by mental illness;
 - 2. Manifested before the individual is age twenty-two; and
 - 3. Likely to continue indefinitely; and
 - b. Has a current need which cannot be met by community-based alternative services in the county where the individual resides (including a situation in which an individual has a current need despite the individual's enrollment in a home and community-based services waiver).
 - 2. The WCBDD will not place an individual's name on the waiting list for home and community-based services when the individual:
 - a. Is a child who is subject to a determination under section 121.38 of the Ohio Revised Code and requires home and community-based services; or
 - b. Has an immediate need, in which case the WCBDD will take action necessary to ensure the immediate need is met. The WCBDD will provide the individual or the individual's guardian (which may include a public children services agency), as applicable, with the option of having the individual's needs met in an intermediate care facility for individuals with intellectual disabilities or through community-based alternative services. Once an individual or individual's guardian



Waiting List, 3.07

chooses the preferred setting option, the WCBDD will take action to ensure the individual's immediate need is met, including by enrollment in a home and community-based services waiver, if necessary. Such action may also include assisting the individual or the individual's guardian, as applicable, in identifying and accessing alternative services that are available to meet the individual's needs.

- 3. When WCBDD places an individual's name on the waiting list for home and community-based services, the WCBDD will:
 - a. Record, the individual's status date in the ODODD's web-based waiting list management system.
 - 1. The individual's status date; and
 - 2. For an individual included in the transitional list of individuals waiting for home and community-based services defined in paragraph (B) (15) of this policy, the individual's date of request.
 - b. Notify the individual or the individual's guardian, as applicable, <u>in writing</u> that the individual's name has been placed on the waiting list for home and community-based services.
 - c. Provide contact information to the individual or the individual's guardian, as applicable, for a person at the WCBDD who can assist in identifying and accessing alternative services that address, to the extent possible, the individual's needs. Contact information will include the person's name, title, telephone number, and electronic mail address.
- 4. Annually, WCBDD will:
 - a. Review the waiting list assessment tool and service needs of each individual whose name is included on the waiting list for home and community-based services with the individual and the individual's guardian, as applicable; and
 - b. Assist the individual or the individual's guardian, as applicable, in identifying and accessing alternative services.
- 5. Under any circumstances, when the WCBDD determines 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 WCBDD will update the individual's record in the ODODD's web-based waiting list management system.
- F. Order for enrolling individuals in locally-funded home and community-based services waivers
 - 1. WCBDD will select individuals for enrollment in locally-funded home and community-based services waivers in this order:
 - a. Individuals with immediate need who require waiver funding to address the immediate need.
 - b. Individuals who have met multiple criteria for current need for twelve or more consecutive months and who were not offered enrollment in a home and community-based services waiver in the prior calendar year. When two or more individuals meet the same number of criteria for current need, the individual with the earliest of either the status date or date of request will be selected for enrollment.
 - c. Individuals who have met multiple criteria for current need for less than twelve consecutive months. When two or more individuals meet the same number of criteria for current need, the individual with the earliest of either the status date or date of request will be selected for enrollment.
 - d. Individuals who meet a single criterion for current need. When two or more individuals meet a single criterion for current need, the individual with the earliest of either the status date or date of request will be selected for enrollment.
 - 2. Individuals with immediate need and individuals with current need may be enrolled in locally-funded home and community-based services waivers concurrently.



Waiting List, 3.07

- 3. Meeting the criteria for immediate need and/or current need does not guarantee enrollment in a locally-funded home and community-based services waiver within a specific timeframe.
- 4. When an individual is identified as next to be enrolled in a locally-funded home and community-based services waiver, the WCBDD will determine the individual's eligibility for enrollment in a home and community-based services waiver. When the WCBDD determines an individual is eligible for enrollment in a home and community-based services waiver, the WCBDD will determine which type of locally-funded home and community-based services waiver is sufficient to meet the individual's needs in the most cost-effective manner.
- 4-5. WCBDD will respond to the department within ten calendar days when the department requests additional information regarding an individual on the waiting list who was passed over for enrollment in a locally-funded home and community-based services waiver despite a higher placement on the waiting list. The county board will collaborate with the department to address any impediments to meeting the individual's needs.
- G. Order for enrolling individuals in state-funded home and community-based services waivers
 - 1. The ODODD will determine the order for enrolling individuals in state-funded home and community-based services waivers.
 - 2. Meeting the criteria for immediate need and/or current need does not guarantee enrollment in a state-funded home and community-based services waiver within a specific timeframe.
- H. Change in an individual's county of residence

When an individual on the waiting list for home and community-based services moves from one county to another and the individual or the individual's guardian, as applicable, notifies the WCBDD as the receiving county, the WCBDD will within ninety calendar days of receiving notice, review the individual's waiting list assessment tool.

- When the WCBDD determines that the individual 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), the WCBDD will update the individual's county of residence in the ODODD's web-based waiting list management system without changing the status date or date of request assigned by the previous WCBDD.
- 2. When the WCBDD determines that the individual has a current need which can be met by community-based alternative services, the WCBDD will assist the individual or the individual's guardian, as applicable, in identifying and accessing those services.
- I. Removal from waiting list for home and community-based services

The WCBDD will remove an individual's name from the waiting list for home and community-based services:

- 1. When the WCBDD determines that the individual no longer has a condition described in paragraph (E)(1)(a) of OAC 5123-9-04;
- 2. When the WCBDD determines that the individual no longer has a current need.
- 3. Upon request of the individual or the individual's guardian, as applicable.
- 4. If the individual or the individual's guardian, as applicable, refuses to secure Medicaid eligibility.
- 3.5. If the individual or the individual's guardian, as applicable, refuses or withdraws consent for service and support administration.
- 4.6. Upon enrollment of the individual in a home and community-based services waiver that meets the individual's needs.
- 5-7. If the individual or the individual's guardian, as applicable, declines enrollment in a home and community-based services waiver or community-based alternative services that are sufficient to meet the individual's needs;

Warren County Board of

Warren County Board of DD Personnel Policy

Waiting List, 3.07

- 6.8. If the individual or the individual's guardian, as applicable, fails to respond to attempts by the WCBDD to contact the individual or the individual's guardian by at least two different methods, from the following list to the last known address of the individual or the individual's guardian, as applicable;
 - a. Electronic mail;
 - b. Traceable delivery service; or
 - c. Personal service.
- 7.9. When the WCBDD determines the individual does not have a developmental disabilities level of care in accordance with rule 5123-8-01 of the Ohio Administrative Code;
- 8.10. When the individual is no longer a resident of Ohio;
- 9.11. Upon the individual's death.

J. Due process

- 1. Due process will be afforded to an individual when WCBDD takes an action related to placement on, denial of placement on, or removal from the waiting list for home and community-based services.
- 2. WCBDD will issue and explain due process to the individual or the individual's guardian, as applicable, using a form approved by the Ohio department of job and family services (available at odjfs.state.oh.us/forms/).
- 3. Due process will be provided in accordance with section 5160.31 of the Revised Code and Chapters 5101:6-1 to 5101:6-9 of the Administrative Code.



- A. This policy sets forth requirements for development and implementation of behavioral support strategies as required by Ohio Administrative Code 5123-2-06 that include both positive measures and restrictive measures for the purpose of ensuring that:
 - 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. Ohio Administrative Code 5123-2-06 applies to persons and entities that provide specialized services regardless of source of payment, including but not limited to:
 - 1. County boards of developmental disabilities and entities under contract with county boards;
 - 2. Residential facilities licensed pursuant to section 5123.19 of the Ohio Revised Code, including intermediate care facilities;
 - 3. Providers of supported living certified pursuant to section 5123.161 of the Ohio Revised Code; and
 - 4. Providers of services funded by Medicaid home and community-based services waivers administered by the department.

Individuals receiving services in a setting governed by the Ohio Department of Education shall be supported in accordance with administrative rules and policies of the Ohio Department of Education.

C. Definitions

- 1. "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. A behavioral support 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.
 - b. 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.
 - c. "Chemical restraint" does not include a medication that is routinely prescribed in conjunction with a medical procedure for patients without developmental disabilities.
- 2. "County board" means a county board of developmental disabilities.
- 3. "Department" means the Ohio Department of Developmental Disabilities.
- 4. "Director" means the Director of the Ohio Department of Developmental Disabilities.
- 5. "Emergency" means 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.



- 6. "Human rights committee" means a standing committee formed by a county board or an intermediate care facility for individuals with intellectual disabilities to safeguard individuals' rights and protect individuals from physical, emotional, and psychological harm. At an intermediate care facility for individuals with intellectual disabilities, the human rights committee may also be referred to as a "specially constituted committee" as that term is used in 42 C.F.R. 483.440 as in effect on the effective date of this policy.
- 7. "Individual" means a person with a developmental disability.
- 8. "Individual service plan" means the written description of services, supports, and activities to be provided to an individual and includes an "individual program plan" as that term is used in 42 C.F.R. 483.440 as in effect on the effective date of this policy.
- 9. "Informed consent" means a documented written agreement to allow a proposed action, treatment, or service after full disclosure provided in a manner an individual or the individual's guardian, as applicable, understands, of the relevant facts necessary to make the decision. Relevant facts include the risks and benefits of the action, treatment, or service; the risks and benefits of the alternatives to the action, treatment, or service; and the right to refuse the action, treatment, or service. An individual or guardian, as applicable, may withdraw informed consent at any time.
- 10. "Intermediate care facility for individuals with intellectual disabilities" has the same meaning as in section 5124.01 of the Revised Code.
- 11. "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. A behavioral support strategy may include manual restraint only when an individual's actions pose risk of harm.
 - b. An individual in a manual restraint shall be under constant visual supervision by staff.
 - c. Manual restraint shall cease immediately once risk of harm has passed.
 - d. Manual restraint does not include a method that is routinely used during a medical procedure for patients without developmental disabilities.
- 12. "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. A behavioral support strategy may include mechanical restraint only when an individual's actions pose risk of harm.
 - b. Mechanical restraint shall cease immediately once risk of harm has passed.
 - c. Mechanical restraint does not include:
 - i. A seatbelt of a type found in an ordinary passenger vehicle or an age- appropriate child safety seat;
 - ii. A medically-necessary device (such as a wheelchair seatbelt or a gait belt) used for supporting or positioning an individual's body; or
 - iii. A device that is routinely used during a medical procedure for patients without developmental disabilities.
- 13. "Precisely-defined pattern of behavior" means a documented and predictable sequence of actions that if left uninterrupted, will very likely result in physical harm to self or others.



- 14. "Prohibited measure" means a method that shall not be used by persons or entities providing specialized services. "Prohibited measures" include:
 - a. Prone restraint.
 - b. 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.
 - c. Use of a manual restraint or mechanical restraint that causes pain or harm to an individual.
 - d. Disabling an individual's communication device.
 - e. 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).
 - f. Placing an individual in a room with no light.
 - g. Subjecting an individual to damaging or painful sound.
 - h. 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).
 - i. Subjecting an individual to any humiliating or derogatory treatment.
 - j. Squirting an individual with any substance as an inducement or consequence for behavior.
 - k. Using any restrictive measure for punishment, retaliation, convenience of providers, or as a substitute for specialized services.
- 15. "Prone restraint" means a method of intervention where an individual's face and/ or frontal part of an individual's body is placed in a downward position touching any surface for any amount of time.
- 16. "Provider" means any person or entity that provides specialized services.
- 17. "Qualified intellectual disability professional" has the same meaning as in 42C.F.R. 483.430 as in effect on the effective date of this policy.
- 18. "Restrictive measure" means a method of last resort that may be used by persons or entities providing specialized services only when necessary to keep people safe and with prior approval in accordance with paragraph (H) of this policy. "Restrictive measures" include:
 - a. Chemical restraint;
 - b. Manual restraint;
 - c. Mechanical restraint;
 - d. Rights restriction; and
 - e. Time-out
- 19. "Rights restriction" means restriction of an individual's rights as enumerated in section 5123.62 of the Ohio Revised Code.
 - a. 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 18 years of age and older shall not be restricted (e.g., by imposition of arbitrary schedules or limitation on consumption of tobacco products).



- c. When a child under the age of 18 receives services and supports from a paid provider, some restrictive measures may be determined age appropriate and implemented without human rights committee approval.
 - i. The following age appropriate restrictions that are typical for a non-disabled child under the age of 18 will be discussed and developed with the child's team and will be clearly identified in the ISP.
 - Time limits on the use of electronic devices, media free times such as mealtimes, and media free locations within the home such as bedrooms for those under the age of 18.
 - 2. Access to foods and drinks with high amounts of sugars, salt, artificial coloring and/or preservatives may be limited for those under the age of 18.
 - 3. Visitors for individuals under the age of 18 may require parent/guardian approval.
 - 4. Routines for daytime, including a balance of preferred and non-preferred activities, and nighttime, including bedtime, may be established for those under the age of 16.
 - 5. Requirements for the completion of homework or chores before play time for those under 13.
 - ii. Additional restrictive measures for children outside the scope of this policy will be presented to the Human Rights Committee Chairperson for review. The Human Rights Committee Chairperson will approve as age appropriate or will refer to the Human Rights Committee for review.
- 20. "Risk of harm" means there exists a direct and serious risk of physical harm to an individual or another person. For risk of harm:
 - a. An individual must be capable of causing physical harm to self or others; and
 - b. The individual must be causing physical harm to self or others or very likely to begin doing so.
- 21. "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 Ohio Administrative Code.
- 22. "Specialized services" means any program or service designed and operated to serve primarily individuals with developmental disabilities, including a program or service provided by an entity licensed or certified by the department. If there is a question as to whether a provider or entity under contract with a provider is providing specialized services, the provider or contract entity may request that the director make a determination. The director's determination is not subject to appeal.
- 23. "Team," as applicable, has the same meaning as in rule 5123-4-02 of the Ohio Administrative Code or means an "interdisciplinary team" as that term is used in 42 C.F.R. 483.440 as in effect on the effective date of this policy.
- 24. "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. A behavioral support strategy may include time-out only when an individual's actions pose risk of
 - b. Time-out shall not exceed thirty minutes for any one incident nor one hour in any twenty-four hour period.



- c. 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.
- d. A time-out room or area shall be adequately lighted and ventilated and provide a safe environment for the individual.
- e. 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.
- f. An individual in a time-out room or area shall be under constant visual supervision by staff.
- g. Time-out shall cease immediately once risk of harm has passed or if the individual engages in selfabuse, becomes incontinent, or shows other signs of illness.
- h. "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-regulation of behavior and is not physically restrained or prevented from leaving the room or area by physical barriers.

D. Development of a behavioral support strategy

- 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:
 - a. Emphasizing alternative ways for the individual to communicate needs and to have needs met;
 - b. Adjusting the physical or social environment;
 - c. Addressing sensory stimuli;
 - d. Adjusting schedules; and
 - e. Establishing trusting relationships
- 2. A behavioral support strategy that includes restrictive measures require:
 - a. Documentation that demonstrates that positive and non-restrictive measures have been employed and have been determined ineffective.
 - b. An assessment conducted within the past twelve months that clearly describes:
 - i. The behavior that poses risk of harm or likelihood of legal sanction or the individual's engagement in a precisely-defined pattern of behavior that is very likely to result in risk of harm;
 - ii. The level of harm or type of legal sanction that could reasonably be expected to occur with the behavior;
 - iii. When the behavior is likely to occur;
 - iv. 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
 - v. The nature and degree of risk to the individual if the restrictive measure is implemented.
 - c. A description of actions to be taken to:
 - i. Mitigate risk of harm or likelihood of legal sanction;
 - ii. Reduce and ultimately eliminate the need for restrictive measures; and
 - iii. 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.
- 3. A behavioral support strategy shall never include prohibited measures.



- 4. Persons who conduct assessments and develop behavioral support strategies that include restrictive measures shall:
 - a. Hold a valid license issued by the Ohio board of psychology
 - Hold a valid license issued by the Ohio counselor, social worker and marriage and family therapist board;
 - c. Hold a valid physician license issued by the state medical board of Ohio; or
 - d. 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.
- 5. A behavioral support strategy that includes restrictive measures shall:
 - a. Be designed in a manner that promotes healing, recovery, and resilience;
 - b. 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;
 - Describe tangible outcomes and goals and how progress toward achievement of outcomes and goals will be identified;
 - d. Recognize the role environment has on behavior;
 - e. Capitalize on the individual's strengths to meet challenges and needs;
 - Delineate restrictive measures to be implemented and identify those who are responsible for implementation;
 - g. Specify steps to be taken to ensure the safety of the individual and others;
 - As applicable, identify needed services and supports to assist the individual in meeting court-ordered community controls such as mandated sex offender registration, drug-testing, or participation in mental health treatment; and
 - i. 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.
- 6. The WCBDD does not consider bed rails, enclosed beds or other medical devices utilized solely for medical necessity to be restrictive measures.
- 7. 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.
- 8. When a behavioral support strategy that includes restrictive measures is proposed by an individual and the individual's team, the qualified intellectual disability professional or the service and support administrator, as applicable, shall:
 - a. 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
 - b. When indicated, seek input from persons with specialized expertise to address an individual's specific support needs.
 - c. Secure informed consent of the individual or the individual's guardian, as applicable.
 - d. Submit to the human rights committee the strategy and documentation, including the record of restrictive measures described in paragraph (F)(4) of this policy, based upon an assessment that clearly indicates:
 - i. The justification for the proposed restrictive measure, that is:
 - 1. When manual restraint, mechanical restraint, or time-out is proposed -- risk of harm;



- 2. 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
- 3. 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.
- ii. The nature and degree of risk to the individual if the restrictive measure is implemented
- e. Ensure the strategy is reviewed and approved in accordance with paragraph (H) of this policy prior to implementation and whenever the behavioral support strategy is revised to add restrictive measures.
- f. 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.
 - i. The review shall consider:
 - 1. 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;
 - 2. New skills that have been developed which have reduced or eliminated threats to safety or wellbeing;
 - 3. The individual's self-report of overall satisfaction in achieving desired outcomes and pursuing interests; and
 - 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
 - ii. 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.
 - iii. A decision to continue the strategy shall be based upon review of up-to-date information justifying the continuation of the strategy.
- E. Reconsideration of a medication initially presumed not to be a chemical restraint
 - 1. When administration of a medication initially presumed not to be a chemical restraint in accordance with paragraph (C)(1)(b) of this policy actually results in a general or non-specific blunt suppression of behavior, the provider is to alert the individual's qualified intellectual disability professional or service and support administrator, as applicable. The qualified intellectual disability professional or the service and support administrator is to ensure the prescriber of the medication and the individual's team are notified.
 - a. The prescriber of the medication may adjust the medication (type or dose) in an effort to abate the general or non-specific blunt suppression of behavior.
 - b. 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 or introducing activities that may mitigate the impact of the medication on the individual's ability to complete activities of daily living).



- 2. 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 is to be regarded as a chemical restraint and submitted to the human rights committee in accordance with paragraph (H) of this policy.
- F. Implementation of behavioral support strategies with restrictive measures
 - 1. Restrictive measures shall be implemented with sufficient safeguards and supervision to ensure the health, welfare, and rights of individuals receiving specialized services.
 - 2. Each person providing specialized services to an individual with a behavioral support strategy that includes restrictive measures shall successfully complete training in the strategy prior to serving the individual.
 - After each incidence of manual restraint, a provider shall take any measures necessary to ensure the safety and wellbeing of the individual who was restrained, individuals who witnessed the manual restraint, and staff and minimize traumas for all involved.
 - 4. Each provider shall maintain a 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., bed alarm or locked cabinet). The record for each event of a manual restraint or a mechanical restraint will include the duration. The provider will share the record with the individual or the individual's guardian, as applicable, and the individual's team whenever the individual's behavioral support strategy is being reviewed or reconsidered.
- G. Establishment of Human rights committees
 - 1. Each county board and each intermediate care facility for individuals with intellectual disabilities shall actively participate in an established human rights committee. A human rights committee may be established by a county board or an intermediate care facility for individuals with intellectual disabilities acting independently or jointly in collaboration with one or more other county boards and/or intermediate care facilities for individuals with intellectual disabilities. The human rights committee shall:
 - a. Be comprised of at least four persons;
 - b. Include at least one individual who receives or is eligible to receive specialized services;
 - Include qualified persons who have either experience or training in contemporary practices for behavioral support; and
 - d. Reflect a balance of representatives from each of the following two groups:
 - Individuals who receive or are eligible to receive specialized services or family members or guardians of individuals who receive or are eligible to receive specialized services; and
 - ii. County boards, intermediate care facilities for individuals with intellectual disabilities or other providers, or other professionals.
 - 2. All information and documents provided to the human rights committee and all discussions of the committee are confidential and shall not be shared or discussed with anyone other than the individual, his or her guardian, and the individual's team.
 - 3. Members of the human rights committee shall receive department-approved training within three months of appointment to the committee in:
 - a. Rights of individuals as enumerated in section 5123.62 of the Ohio Revised Code;
 - b. Person-centered planning;
 - c. Informed consent;
 - d. Confidentiality; and
 - e. The requirements of this policy.



- 4. Members of the human rights committee shall annually receive department- approved training in relevant topics which may include but are not limited to:
 - a. Self-advocacy and self-determination;
 - b. Role of guardians and section 5126.043 of the Ohio Revised Code;
 - c. Effect of traumatic experiences on behavior; and
 - d. Court-ordered community controls and the role of the court, the county board or intermediate care facility for individuals with intellectual disabilities, and the human rights committee.
- H. Review of behavioral support strategies that include restrictive measures
 - 1. There are two distinct processes for review of behavioral support strategies that include restrictive measures based on the nature of the request:
 - a. Emergency request.
 - i. An emergency request for a behavioral support strategy that includes restrictive measures shall consist of:
 - 1. A description of the restrictive measures to be implemented;
 - 2. Documentation of risk of harm or legal sanction which demonstrates the situation is an emergency;
 - 3. A description of positive measures that have been implemented and proved ineffective or infeasible;
 - 4. Any medical contraindications; and
 - 5. Informed consent by the individual or the individual's guardian, as applicable.
 - ii. Prior to implementation of a behavioral support strategy submitted via the emergency request process, the strategy must be approved by:
 - A quorum of members of the human rights committee in accordance with 42 C.F.R. 483.440 as in effect on the effective date of this policy for an individual who resides in an intermediate care facility for individuals with intellectual disabilities; or
 - The superintendent of the Warren County Board of Developmental Disabilities (WCBDD) or the superintendent's designee for an individual who does not reside in an intermediate care facility for individuals with intellectual disabilities.
 - iii. A behavioral 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 with the process for a routine request described in paragraph (H)(2) of this policy.
 - 2. Routine request.
 - a. Absent an emergency, a 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, is to 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.
 - c. In its review of an individual's behavioral support strategy, the human rights committee is to:



- i. 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.
- ii. Ensure that the proposed restrictive measures are necessary to reduce risk of harm or likelihood of legal sanction.
- iii. When indicated, seek input from persons with specialized expertise to address an individual's specific support needs.
- iv. 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.
- v. Ensure that a restrictive measure is temporary in nature and occurs only in specificallydefined situations based on:
 - 1. Risk of harm for manual restraint, mechanical restraint, or time-out;
 - 2. Risk of harm or an individual's engagement in a precisely- defined pattern of behavior that is very likely to result in risk of harm for chemical restraint; or
 - 3. Risk of harm or likelihood of legal sanction for a rights restriction.
- vi. 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.
- vii. 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.
- viii. Approve in whole or in part, reject in whole or in part, monitor, and when indicated, reauthorize behavioral support strategies that include restrictive measures.
- ix. Communicate the committee's determination including an explanation of its rejection of a strategy in writing to the qualified intellectual disability professional or service and support administrator that submitted the request for approval.
- d. The qualified intellectual disability professional or service and support administrator 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.
- e. An 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 the request for reconsideration with additional information provided as rationale for the request to the qualified intellectual disability professional or service and support administrator, as applicable, in writing within fourteen calendar days of being informed of the rejection. The qualified intellectual disability professional or service and support administrator is to forward the request to the human rights committee within seventy-two hours. 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.
- f. An individual who resides in an intermediate care facility for individuals with intellectual disabilities or the individual's guardian, as applicable, may appeal to the facility's specially constituted committee in accordance with the facility's procedure if the individual or guardian, as applicable, is dissatisfied with the strategy or the process used for development of the strategy.



- g. An individual who does not reside in an intermediate care facility for individuals with intellectual disabilities or the individual's guardian, as applicable, may seek administrative resolution in accordance with rule 5123-4-04 of the Ohio Administrative Code if the individual or guardian is dissatisfied with the strategy or the process used for development of the strategy.
- I. Use of a restrictive measure without prior approval
 - 1. 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.
 - 2. 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 paragraph (H) of this policy shall be reported as an "unapproved behavioral support" in accordance with rule 5123-17-02 of the Ohio Administrative Code.
- J. Reporting of behavioral support strategies that include restrictive measures
 - The WCBDD shall enter information regarding behavioral support strategies that include restrictive measures in the department's restrictive measures notification system. Corresponding entries are to be made:
 - a. After securing approval in accordance with paragraph (H) of this policy and prior to implementation of a behavioral support strategy that includes restrictive measures; and
 - b. When a restrictive measure is discontinued.
- K. Analysis of behavioral support strategies that include restrictive measures
 - The WCBDD shall annually compile and analyze aggregate data extracted from the department's restrictive
 measures 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. Data compiled and analyzed shall include, but are not limited to:
 - a. Nature and frequency of risk of harm or likelihood of legal sanction that triggered development of strategies that include restrictive measures;
 - 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 paragraph (H) of this policy;
 - c. Number of restrictive measures by type of restrictive measure (i.e., chemical restraint, manual restraint, mechanical restraint, rights restriction, and time-out) implemented;
 - d. Number of strategies that include restrictive measures that have been discontinued and the reasons for discontinuing the strategies; and
 - e. An in-depth review and analysis of either:
 - 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
 - ii. 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.
 - 2. The WCBDD shall make the data and analyses available to the department upon request.



L. Department oversight

- 1. The department will take immediate action as necessary to protect the health and welfare of individuals which may include, but is not limited to:
 - a. Suspension of a behavioral support strategy not developed, implemented, documented, or monitored in accordance with this policy or where trends and patterns of data suggest the need for further review;
 - b. Provision of technical assistance in development or redevelopment of a behavioral support strategy; and
 - c. Referral to other state agencies or licensing bodies, as indicated.
- 2. The department will compile and analyze data regarding behavioral support strategies 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. The department will make the data and analyses available.
- 3. The department may periodically select a sample of behavioral support strategies for review to ensure that strategies are developed, implemented, documented, and monitored in accordance with this policy.
- 4. The department will conduct reviews of county boards and providers as necessary to ensure the health and welfare of individuals and compliance with this policy. Failure to comply with this policy may be considered by the department in any regulatory capacity, including certification, licensure, and accreditation.

M. Waiving provisions of this Ohio Administrative Code 5123-2-06

1. For good cause, the director may waive a condition or specific requirement of this policy except that the director shall not permit use of a prohibited measure as defined in paragraph (C)(14) of this policy. The director's decision to waive a condition or specific requirement of this policy shall not be contrary to the rights, health, or safety of individuals receiving services. The director's decision to grant or deny a request is not subject to appeal.

Warren County Board of Developmental Disabilities

Warren County Board of DD Agency Policy

Photographing Individuals, 3.09

- A. The Warren County Board of Developmental Disabilities (WCBDD) upholds the right of each individual to confidentiality and privacy. Therefore, the WCBDD shall not permit individuals to be photographed or videotaped without the permission of the individual, the parent (if a minor), or guardian at any time that the individual is present at agency programs and events of the WCBDD, regardless of the setting.
- B. Individuals receiving services from the Service and Support Administration Division, their parents (if a minor), or guardians will be asked to sign form SSF-109 annually. This form provides acknowledgment and consent for several items, including photo release consent for publishing of photos. Individuals have the option to agree to or decline photo release consent. Individuals who do not have the SSF-109 form signed giving consent to release photos and videos will be asked to sign an Agency photo consent form AGF 054. The consent must specify the reason the photograph or videotape is being made and the person(s) or agency/agencies who would have access to the photograph or videotape. Examples of non-routine photographing or videotaping would include, but are not limited to, promotional, research or behavioral purposes, or any time the intent is to disseminate photograph(s) or videotape(s) for public consumption in any manner or for any reason. In no instance will the WCBDD be cooperative with, or approve of, the making of videotape(s) or taking of photograph(s) without the expressed consent and knowledge of all individuals who might be involved, whether as the primary or incidental person(s) in the photograph(s) or videotape(s).
- C. The WCBDD conducts activities for eligible individuals on WCBDD property which are, at times, covered by the media, which may take pictures of individuals served. The WCBDD makes reasonable efforts to let individuals and/or guardians know about such events in advance. Individuals and/or guardians can request to be excluded from this kind of media coverage by asking any staff member.
- D. An exception to this policy is in the case of incident investigations being conducted by the WCBDDarren County Investigative Agent, Children's Services, or a Law Enforcement agency. In these cases, photograph(s) or videotape(s) may be made available as deemed necessary by the officials conducting the investigation. However, care shall be taken to treat the person(s) in such photograph(s) or videotape(s) with courtesy, sensitivity, and respect. Further, the photograph(s) or videotape(s) yielded from any investigation will be treated with the utmost confidentiality.



Insurances, 4.C.10

- A. The Warren County Board of Developmental Disabilities (WCBDD) offers its full-time employees who are regularly scheduled to work thirty (30) hours or more per week optional benefits, which include:
 - a. Group Health and Prescription Insurance
 - b. Dental Insurance
 - c. Vision Insurance
- B. Employees are responsible for keeping the insurance carrier current of any changes affecting their coverage. (i.e. marriages, <u>divorces</u>, births, etc.) This is to be done by notifying the Human Resources Office no later than 2 weeks after the event.
- C. The WCBDD reserves all rights as to the determination of insurance carriers. The WCBDD shall also reserve the right to limit the amount of premiums for which the WCBDD will be liable.
- D. The optional benefits offered by the WCBDD qualify as a Cafeteria Plan under section 125 of the Internal Revenue Services Code of 1986. This allows:

Eligible employees to pay their portion of the cost of benefits on a pre-tax basis.

OR

The employee may elect to waive all Optional Benefits for themselves and their family members and he/she will receive a taxable amount of \$100.00 per eligible month per Plan Year.

- E. In order to be eligible for the \$100.00/month rebate for voluntarily declining to carry Optional Benefits, the employee must complete and submit to the Human Resources Office a WCBDD Waiver of Insurance Form and proof of other coverage.
- F. Working Spouse Rule Spouses of WCBDD employees are excluded from WCBDD Group Health and Prescription Insurance if the spouse is employed, his/her employer offers medical insurance, and the employer pays 50% or more of the cost of the premium for single coverage.
- G. Full-time employees who are regularly scheduled to work thirty (30) hours or more per week are eligible for group life insurance. The policy is a no cost term life insurance policy and is in effect only as long as the employee is employed by the WCBDD.
- G.H.Employees have the option of purchasing additional life insurance for themselves, their spouse, and dependents.

 Information regarding this life insurance option can be obtained by contacting the Human Resources Office.
- H.I. The WCBDD offers a high—deductible health insurance plan with a Health Savings Account (HSA). For further information on the health insurance plan or the life insurance plan, employees should review the specific plan documents provided by the Human Resources Office.
- I. In compliance with the Federal Health Insurance Portability and Accountability Act (HIPAA), protected health information is defined as: Individually identifiable health information that is or has been electronically maintained or electronically transmitted by a covered entity, as well as such information when it takes any other form that is (1) Created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) Related to the past, present, or future physical or mental health condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual. Identifiable health information may be needed from time to time for employment purposes such as, but not limited to:
 - 1. Family Medical Leave Act
 - 2. Disability Claims/Workers' Compensation Claims
 - 3. Fitness for duty evaluations
 - 4. Drug Testing
 - 5. Providing employee assistance with claims processing, when requested by employee.

When these situations arise, the employee will be required to sign a Release of Information Authorization form. Failure of the employee to complete such authorization in a timely fashion may cause the employer to delay or deny requests, such as Family Medical Leave.



Insurances, 4.C.10

Warren County Board of Developmental Disabilities

Warren County Board of DD Personnel Policy

Holiday and Supplemental Leave, 4.D.08

A. 1. The following is a list of the legal holidays that the Warren County Board of Developmental Disabilities (WCBDD) is obligated to observe:

New Year's Day

Martin Luther King Jr. Day

Presidents Day

Memorial Day

Juneteenth

Independence Day

1st day of January

3rd Monday in January

3rd Monday in February

Last Monday in May

Juneteenth

19th day of June

4th day of July

Labor Day 1st Monday in September

Columbus Day 2nd Monday in October (to be scheduled by the WCBDD between

Christmas and New Year's Day)

Veteran's Day 11th day of November
Thanksgiving Day 4th Thursday in November
Christmas Day 25th day of December

- 2. Eligible employees also receive four (4) supplemental paid leave days as approved on agency calendar.
 - The Friday after Thanksgiving.
 - Three (3) additional supplemental paid leave days to be scheduled by the WCBDD between Christmas and New Year's Day. All staff-full-time staff will receive 7.75 hours of supplemental paid leave time. All sStaff with remote access willare expected to log in and work for approximately 15 minutes each morning to check and respond to essential communications. If there is something in yourjob-related duties and communications that require s you to work longeradditional time, than 15 minutes, please contact your employees must notify their supervisor. Any time worked afterbeyond the initial the 15 minutes will be paid yourcompensated at the employee's hourly rate. For example, if youan employee need to-works an additional hour due to something in a messagea necessary task identified in morning communication, youthe employee -will receive 1.25 hours of time workedwork time (15 minutes standard plus 1 hour additional), in addition to the -and 7.75 hours of supplemental pay, for a total of 9 hours paid for the day.
- B. A holiday falling on Sunday will be observed on the following Monday, and a holiday falling on Saturday will be observed on the preceding Friday.
- C. All twelve (12) month full-time and part-time employees of the Warren County Board of Developmental Disabilities are eligible for Holidays and Supplemental Leave Days and will receive the designated days off with pay for their regularly scheduled hours.
- D. Seasonal employees do not receive paid leave day pay.
- E. If a paid leave day occurs during a period of paid sick or vacation leave, the employee will draw normal pay and will not be charged for sick leave or vacation.
- F. Payment will not be made for a paid leave day, which occurs during a leave of absence. A leave of absence should neither start nor end on a paid leave day and a new appointment should not be made effective on a paid leave day.
- G. Overtime eligible employees who are required to work on a holiday will be compensated at one and one-half (1½) hours pay for each hour worked in addition to normal holiday pay.
- H. Overtime eligible employees who are required to work on a supplemental paid leave day will be compensated at the employee's regular daily rate of pay in addition to the supplemental leave day pay.
- I. Employees may request alternative religious holidays. This request shall be made in writing to the Superintendent who shall respond in writing and who may approve the forfeit of named holidays instead of the alternative holidays.

J.	An employee in no pay status (either full or partial day) immediately prior to or after a paid leave day shall not receive compensation for the paid leave day.



Sick Leave and Sick Leave Conversion, 4.D.09

A. Accrual:

- 1. For each completed hour in active pay status, an employee earns .0575 hours of sick leave. Active pay status is defined as hours during which an employee is eligible to receive pay, which includes hours worked and hours on paid leave.
- 2. Part-time employees accrue sick leave on a proportionate basis of .0575 per hour of active pay status.
- 3. The amount of sick leave any one employee may accrue is unlimited.
- 4. Employees who transfer between County departments or agencies, or from another public agency, or who are reappointed or reinstated, will be credited with the unused balance of accumulated sick leave, provided the time between separation, reappointment, or transfer does not exceed ten (10) years and the unused balance has not been eliminated by a prior conversion of sick leave at retirement or other termination. The words "public agency" as used above means those entities required to provide sick leave under O.R.C. 124.38 and 124.382, including the State, counties, municipalities, and all Boards of Education, civil service townships, etc., within the State. Villages, Private Industry Councils, libraries organized as non-profit corporations, and other entities not required to provide sick leave under O.R.C. 124.38 or 124.382 are not "public agencies."
- B. <u>Usage</u>: Sick leave may be requested for the following reasons:
 - 1. Illness or injury of the employee, or of a member of his or her immediate family;
 - 2. Exposure of the employee or a member of his or her immediate family to a contagious disease, which would have the potential of jeopardizing the health of the employee or the health of others;
 - 3. Death of a member of the employee's immediate family (see Bereavement Leave);
 - 4. Medical, dental, or optical examinations or treatment of the employee or member of his or her immediate family: or
 - 5. Pregnancy, childbirth, and/or related medical conditions.
 - *Use of sick leave for the adoption of a child is not permissible under the Ohio Revised Code.

For purposes of this policy, "immediate family" is defined as only: mother, father, brother, sister, child (including foster and step), spouse, grandparent, grandchild, mother-in-law, father-in-law, sister-in-law, brother-in-law, daughter-in-law, son-in-law, legal guardian or other person who stands in the place of a parent.

C. Requests for Sick Leave Approval:

- 1. An employee may request sick leave for absences resulting from illness as described above by completing a Time Off Request in the Kronos System.
- 2. An employee requesting sick leave shall inform his or her supervisor of the fact and the reason at least one-quarter (¼) hour prior to his or her scheduled starting time. The operational needs of a division may necessitate a different notification time. If so, the affected employees will be notified. Employees must notify their supervisor each day they will be absent due to illness or injury unless otherwise instructed by their supervisor due to extended illness. Failure to do so may result in denial of sick leave for the period of absence.
- 3. When notifying his/her supervisor, the employee shall indicate:
 - a. The nature of the illness;
 - b. Number of days to be off work;
 - c. If he/she plans to seek medical attention;
 - d. A phone number or address where he/she may be contacted; and
 - e. What job responsibilities would he/she have been responsible for during the projected illness.
- 4. An employee may not have someone report him/her off work unless emergency conditions make it impossible for the employee to personally contact his/her supervisor.
- 5. If an employee requires an emergency room visit, has a surgery, or is hospitalized, a statement from a medical practitioner must be presented to the supervisor or director prior to the employee returning to work. The

Warren County Board of

Warren County Board of DD Personnel Policy

Sick Leave and Sick Leave Conversion, 4.D.09

- statement shall state the nature of the illness or injury and when the employee may be reasonably expected to return to work to perform the duties of his/her position.
- 6. An employee may be required to submit a medical statement for an absence of any duration when the employee's sick leave requests show a pattern (e.g., frequency, before or after holidays, specific days of the month or week, etc.).
- 7. Sick leave requests for the scheduled workday immediately before or after a holiday or vacation may be thoroughly investigated and only approved with satisfactory documentation or an exemplary attendance record.
- 8. If pre-approved, vacation leave may be used for sick leave purposes, at the employee's request and with the approval of his/her supervisor or designee.

D. Payment:

- 1. Sick leave shall be charged in minimum amounts of one-quarter (¼) hour.
- 2. Employees absent on sick leave shall be paid at the same basic hourly, daily, or biweekly rate as when they were working.
- 3. If sick leave is denied and as a result the employee has been overpaid, such overpayment shall be deducted from the employee's next paycheck.

E. Abuse:

- 1. Any employee failing to comply with sick leave rules and regulations will not be entitled to sick leave payment.
- 2. A request for use of leave may be denied by the supervisor based upon any investigation, which discloses facts inconsistent with the proper use of sick leave. As part of the investigation, the employee may be required to submit to a medical examination or other inquiry, which the Superintendent deems necessary. When Warren County Board of Developmental Disabilities (WCBDD) as part of an investigation requires such examination, the WCBDD shall pay the cost.
- 3. The WCBDD has the right to verify by way of a call or visit, that the employee is actually ill or absent for the reasons reported.
- 4. Altering a physician's certificate or falsification of a written signed statement shall be grounds for disciplinary action up to and including termination.
- 5. An employee fraudulently obtaining sick leave, or anyone found falsifying sick leave records, shall be subject to disciplinary action, up to and including termination in accordance with policies outlined in this manual.

F. Sick Leave Conversion:

- 1. A WCBDD employee, at the time of retirement from active service with the WCBDD under OPERS or STRS, shall be paid one-fourth (¼) the value of his or her earned but unused sick leave credit, if the employee has reached ten (10) or more years of service. The maximum of such payment, however, shall be for thirty (30) days credit. Employees hired by the WCBDD prior to April 3, 1985, shall be entitled to convert one hundred percent (100%) of their accumulated sick leave hours, up to a maximum of one hundred twenty (120) days.
- To qualify for such payment, the employee shall have had, prior to the date of retirement, ten (10) or more
 years of service with the County, the state, or any of its political subdivisions, and be eligible to receive OPERS
 or STRS benefits.
- 4.3. Such payment shall be based on the employee's hourly rate of pay at the time of retirement and eliminates all sick leave credit accrued but unused by the employee at the time payment is made. Payment shall be made only once to any employee.
- 2.4. Eligible county employees, retiring from active service, shall request such payment by completing the "Sick Leave Conversion" form, in order to initiate the payment process.
- 3.5. The Superintendent shall review the payout amount and determine whether to make an immediate payout or defer the payout for a maximum of six (6) months.



Sick Leave <u>and Sick Leave Conversion</u>, 4.D.09

6. Beneficiaries of a deceased employee shall be eligible for the sick leave conversion benefits for which the employee would have otherwise qualified in accordance with F.2. above. Such payment shall be made in compliance with O.R.C. 2113.04.



Dress Code, 4.F.02

The purpose of this policy is to establish guidelines for professional dress as employees of the Warren County Board of Developmental Disabilities (WCBDD). A division may adopt a dress code <u>procedure</u> that addresses its specific needs. <u>The WCBDD will adhere to a minimum of a "Business Casual" dress code</u>. In all cases the WCBDD reserves the right to prescribe appropriate dress and grooming, and to set standards that are in the best interests of the WCBDD and the individuals it serves. Further, the WCBDD requires employee's clothing and overall appearance to be appropriate and in good taste, present a favorable appearance to the public, and serve as a role model for enrolled individuals.

- Each staff member is a representative of the WCBDD and should use good judgment in projecting a positive and professional image of WCBDD and themselves.
- 2. <u>WCBDD employees All staff</u> may dress appropriately for the activities planned for any given day, but always within the limits of good taste and professionalism. All clothing should fit properly and be conducive to the safe and effective performance of required job duties.
- 3. No excessively revealing clothing is permitted. This includes clothing which exposes the midriff, is shear or see through, has a cut or fit that is inappropriate for the workplace, or is constructed of a form fitting material that fails to appropriately conceal private areas of the body even though covered.
- 4. —No offensive slogans or pictures may be worn. Clothing that promotes a product, a brand, a person, a political or religious view, or an event should not be considered work attire.
- 5. Appropriate tops/shirts would be collared shirts such as button-downs, polos (long or short sleeved), blouses, knit tops, zippered pullovers or sweaters. T-shirts and sweatshirts should be avoided unless a WCBDD shirt is worn for the appropriate duties of the day. Shorts may be worn provided they are mid-thigh length at a minimum and conform to general conditions set forth in items #1 and
- 3.6. Appropriate bottoms/pants would be dress pants, khakis, chinos, dressy capri pants, or skirts or dresses that are the appropriate length. Sweatpants, yoga pants, athletic pants, pajama pants, miniskirts, shorts, and leggings (unless worn with a top that meets the requirements in #3) should not be worn. Shorts should not be considered office attire and should be reserved for outdoor work activities when appropriate. Jeans may be worn only or when appropriate for the work activities planned for a given day.
- 7. Appropriate shoes would be dress shoes, including flats, heels, or dressy sandals; boots; or clean tennis shoes.

 Dirty or worn tennis shoes, Crocs, flip-flops, slides, and slippers should not be worn,
- 8. Hats are not permitted unless related to religious or medical purposes, or unless necessary for the job and approved by the supervisor.
- 9. No offensive slogans or pictures may be worn. Graphic tee shirts or clothing that promotes a product, a brand, a person, a political or religious view, or an event should not be considered work attire unless it is WCBDD related. Jewelry should be kept to a minimum.

5-10. Tattoos that contain subject matter which could be perceived as offensive, disruptive or contradictory to the WCBDD's philosophy and/or depict violence, profanity, sexual situations or illegal acts will need to be covered.

4

* ***

Warren County Board of DD Personnel Policy

Dress Code, 4.F.02

All dress/clothing is subject to the discretion of the director/supervisor as to its appropriateness and safety. No flip flops are permitted.

An employee who reports to work dressed inappropriately may be sent home and not permitted to return to work office until the employee he/she is dressed appropriately. An employee will not be paid for time missed as a result of being sent home.

Warren County Board of Developmental Disabilities

Warren County Board of DD Personnel Policy

Sick Leave Conversion, 4.D.10

COMBINED WITH POLICY 4.D.09—RECOMMEND DELETION OF 4.D.10

A Warren County Board of Development Disabilities (WCBDD) employee, at the time of retirement from active service with the WCBDD under OPERS or STRS, shall be paid one-fourth (¼) the value of his or her earned but unused sick leave credit, if the employee has reached ten (10) or more years of service. The maximum of such payment, however, shall be for thirty (30) days credit. Employees hired by the WCBDD prior to April 3, 1985, shall be entitled to convert one hundred percent (100%) of their accumulated sick leave hours, up to a maximum of one hundred twenty (120) days.

- A. To qualify for such payment, the employee shall have had, prior to the date of retirement, ten (10) or more years of service with the County, the state, or any of its political subdivisions, and be eligible to receive OPERS or STRS benefits.
- B. Such payment shall be based on the employee's hourly rate of pay at the time of retirement and eliminates all sick leave credit accrued but unused by the employee at the time payment is made. Payment shall be made only once to any employee.
- C. Eligible county employees, retiring from active service, shall request such payment by completing the "Sick Leave Conversion" form, in order to initiate the payment process.
- D. The Superintendent shall review the payout amount and determine whether to make an immediate payout or defer the payout for a maximum of six (6) months.
- E. Beneficiaries of a deceased employee shall be eligible for the sick leave conversion benefits for which the employee would have otherwise qualified in accordance with paragraph "A" above. Such payment shall be made in compliance with O.R.C. 2113.04.